STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

(Date)

. ** **** ***		Ī	
DISTRIBUTION			
SANTA FE			
FILE			
U.S.Q.A.			
LAND OFFICE			
TRAMSPORTER	016		
	GAS		
OPERATOR			
PROBATION OFFICE			

OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

Form C-104 Revised 10-01-78 Format 06-01-83 Page 1



REQUEST FOR ALLOWABLE

OPERATOR	AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			SEP 0 9 1985		
PROBATION OFFICE			RAL GAS	OIL CON		
Operater		 				
	'NC				DIST. 3	
MERIDIAN OIL I	.NC.					
P. O. BOX 4289	· FARMINGTON	NEW MEXICO 8	7499			
Reason(s) for filing (Check proper		, ILDII TERRECO	Other (Please	explain)		
New Well				Oil Inc. is	s an agent fo	r
Recompletion	OII	pr		Oil Product	_	
XX Change in Change DE Open	atorship com	nghead Gas 🔲 Co	ndensate			
operatorship of change of Newherking give has and address of previous owner.	ne ,	Exploration Comian Oil Product	pany whose name	changed, as	s of 4-10-85,	
II. DESCRIPTION OF WELL	AND LEASE			Kind of Lease		Lease No.
Jicarilla 119 N	#13	Pool Name, Including Fo Tapacito Pi	ctured Cliffs	State, Federal or F	deral Jic.	Cont #119
Location		NT L %	1270		West	
E	2140 Feet Fro	m TheLin	• and	Feet From The _		
Unit Letter		ma/N	R4W		Rio Arriba	_
Line of Section	Township	T26N Range	, NMPM	<u> </u>		County
Name of Authorized Transporter of Northwest Pipelin	of Cil or C	ondensate or Dry Gas 🔀	Address (Give address	to which approved c		be sent)
If well produces oil or liquids,	Unit Sec		Is gas actually connect	ed? When		
give location of lanks.			<u> </u>		· · · · · · · · · · · · · · · · · · ·	
If this production is commingle	d with that from a	y other lease or pool,	give commingling orde	r number:		
NOTE: Complete Parts IV	ind V on reverse:	side if necessary.	14			
TO COMPLIANCE			OIL CONSERVATION DIVISION			
VI. CERTIFICATE OF COMPLIANCE			SEP 09 985			
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of		APPROVED	k Java			
my knowledge and belief.		SUPERVISOR DISTRICT # 0				
_			TITLE SUPER	TISUR DISTRICT 20		
	4		This form is to	be filed in com	pliance with RULE	1104.
James & fermen Fr			If this is a request for silowable for a newly drilled or deepened			
JAMES R. PERMENTER	(Signature)		well, this form mus	t be accompanied	i by a tabulation of	the deviation
7	EY-IN-FACT		tests taken on the			
ATION	(Title)		All sections of able on new and re	this form must be completed wells.	e filled out complet	101 E110W
, DDII	10 1005		11		T and Willor chang	res of owner

well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.