

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

PROPERTY NO.	
SECTION	
TOWNSHIP	
RANGE	
NEEDS	
WELL NO.	
WELL NAME	
WELL TYPE	
WELL STATUS	
WELL DEPTH	
WELL DIRECTION	
WELL LOCATION	

OIL CONSERVATION DIVISION
P. O. BOX 4289
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Form 06-01-73

RECEIVED
NOV 01 1988
OIL CON. DIV.
SANTA FE

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Company Meridian Oil Inc.		
Address P. O. Box 4289, Farmington, NM 87499		
Reason(s) for filing (Check proper box):	Change in Transporter of:	Other (Please explain)
☐ New Well	☐ Oil	Meridian Oil Inc. is Operator for El Paso Production Company
☐ Reoperation	☐ Condensed Gas	
☒ Change Ownership/Operatorship	☐ Dry Gas	

If change of ownership give name and address of previous owner: El Paso Natural Gas Company, P. O. Box 4289, Farmington, NM 87499

II. DESCRIPTION OF WELL AND LEASE

Lease Name Klein	Well No. 10	Pool Name, Indication Formation Otero Chacra Ext.	Kind of Lease (State, Federal) or Fee	Lease No. SF 079265
Location				
Unit Letter G	1808	Feet From Tls North	Line and 1750	Feet From The East
Line of Section 34	Township 26N	Range 6W	NMPM	Kio Arriza

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil Meridian Oil Inc.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 4289, Farmington, NM 87499
Name of Authorized Transporter of Condensed Gas El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 4289, Farmington, NM 87499
If well produces oil or liquids, give location of tanks.	Unit G
Sec. 34	Twp. 26N
Rge. 6W	

If this production is commingled with that from any other lease or pool, give commingling order number:

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

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 my knowledge and belief.

[Signature]
(Signature)
Drilling Clerk
(Date)
11-1-86
(Date)

OIL CONSERVATION DIVISION

NOV 01 1988

APPROVED _____
BY *[Signature]*
TITLE SUPERVISOR DISTRICT #3

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or reworked well, this form must be accompanied by a tabulation of the production tests taken on this well in accordance with RULE 111.

All sections of this form must be filled out completely for flowable or new and recompleted wells.

Fill out only Sections I, II, III, and VI for change of owner, well name or number, or transporter or other such change of conditions.

Separate Forms C-104 must be filed for each pool or multiple completed wells.