## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

DISTRIBUTION			
SANTA PE			
FILE			
U.S.O.S.			
LAHO OFFICE			
TRANSPORTER	OIL		
	GAS	Ŀ	
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

REQUEST FOR ALLOWABLE AND

PROBATION OFFICE	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GABIST							
Operator		<del></del>		<del></del>	- tot. 3			
Meridian Oil Inc.								
Attress						<del></del>		
P. O. Box 4289, Farmingto	n, NM	87499						
Reason(s) for filing (Check proper box)				Other (Please	explain) (Pool	Name Char	nge)	
New Well	Change in Transporter of:			Meridian Oil Inc. is Operator				
Recompletion	OII	Dri	y Gos for El Paso Production Company					
X Change in District NON Operatorshi	Cest	nghead Gas 🔲 Co	ndensate :			• •		
			-					
If change of ownership give name $E1-P$	aso Na	tural Gas Compa	ny, P.	0. Box 43	289, Farmingt	ton, NM 8749	19	
and address of previous owner								
II. DESCRIPTION OF WELL AND LE	ASE							
Lease Name	Well No.	Pool Name, including Fo	Formation		Kind of Lease		Lease No.	
Nageezi	2	Dufers Point	Gallu	Dakota	State, Rederal or Fe	•• NM 689	5	
Location								
I 1800	Feet Fre	m The South Line	and	800	Feet From The	East		
Unit Letter::					_			
Line of Section 1 Townshi	Þ	25N Range	9W	, NMPM,	, San	Juan	County	
	<del></del>							
III. DESIGNATION OF TRANSPORT	TER OF	OII. AND NATURAL	GAS					
Name of Authorized Transporter of Oil	or C	ondensate 🛣	Address	(Give address t	o which approved co	py of this form is to	) be sent)	
Meridian Oil Inc.		P. O. Box 4289, Farmington, NM 87499  ad Gas or Dry Gas (X) Address (Give address to which approved copy of this form is to be sent)						
Name of Authorized Transporter of Casingh	ead Gas	or Dry Gas 🔏	Address	(Give address t	o which approved co	py of this form is to	) be sent)	
El Paso Natural Gas Company P. O. Box 4289, Farmington, NM 87499					9			
Tintt Sec. Twp. Rge. Is gas actually connected? , when								
If well produces oil or liquids, give location of tanks.	т і	1 25N 9W			!			
			aive com	mingling order	number:			
If this production is commingled with th	at trom at	ny other lease or poor,	Rive Com	minging olde.		<del></del>		
NOTE: Complete Parts IV and V on	reverse :	side if necessary.						
				OIL CONSERVATION DIVISION				
VI. CERTIFICATE OF COMPLIANCE	<b>.</b>			0.0			h 4000	
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.		APPR	OVED			<b>9</b> 1986_		
				Tr		<i>[</i>		
		BY	<del>-</del>			X		
			TITLE	•	SUPERV	ISOR DISTRICT 3 3	0	
See ( )					be filled in compl			
Ilggy Loak		If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation						
, , , , , , , , , , , , , , , , , , , ,			tests	taken on the	well in accordance	with RULE 111	•	
All sections of this form must be filled out completely for al					tely for allow-			
11_1_86								
<del></del>			Fill out only Sections I. II. III, and VI for changes of owner, well name or number, or transporter or other such change of condition.					
(Date)			Separate Forms C-104 must be filed for each pool in multiply					
				ted wells.	104 mast 44			