STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

. ** (*** **********				
DISTRIBUTION				
SANTA FE				
FILE			i	
U.1.0.A.				
LAND OFFICE		1		
TRANSPORTER	OIL			
	GAS			
OPERATOR				
PROMATION 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

AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

PROMATION OFFICE	UTHORIZATION TO TRANSPO	ORT OIL AND NATU	RAL GAS		
I				·	
Operator		•			
Merrion Oil & Gas Cor	o			<u> </u>	
Address					
P. O. Box 840, Farming	gton, New Mexico 874	99			
Reason(s) for filing (Check proper box)		Other (Please	explain)		
	Change in Transporter of:				
	X 011 Dry	Cas			
Change in Ownership	Casinghead Gas Con	idenzore			
Change In Outstand					
If change of ownership give name			•		
and address of previous owner		······			
	CT.	•			
II. DESCRIPTION OF WELL AND LEA	NOL Pool Name, including For	rmation	Kind of Lease		Lease No.
121	i		State, Federal or Fee	Endonal	CE 079475
Stevenson	3 Dufers Point	<u>Gallup-Dakota</u>	<u> </u>	_rederal	SF-078475
Location					
Unit Letter K : 1980	Feet From The South Line	and1980	Feet From The	_West	
	OEN	011		Cam luam	Cavatu
Line of Section 8 Township	25N Range	8W , мыры	·	San Juan	County
					•
III. DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL	GAS Address (Give address	in which approved con	e of this form is to	he sent!
Name of Authorized Transporter of CII	or Condensals				,
Conoco Transportation	, Inc.	P. O. Box 142	9, Bloomfield,	(A) (A)	1
Name of Authorized Transporter of Costnahea	d Gos Or Dry Gus	Address (Give address	to which approved cop	y of this form is to	oc sen:/
·	ļ		•		
Unit	Sec. Twp. Rge.	is gas actually connect	ed? When		•
If well produces off or liquids, give location of tanks.	! 8	Yes		7 / 85	
If this production is commingled with that	from any other lesse or pool	rive commingling orde	r number:		
If this production is commingied with the	Trom kiny other texas or poor,		<u></u>		
NOTE: Complete Parts IV and V on I	everse side if necessary.				
· · · · · · · · · · · · · · · · · · ·			ONSERVATION	DIVISION	
VI. CERTIFICATE OF COMPLIANCE		טור ט	EC 10 1997	DIVISION	
I hereby certify that the rules and regulations of	the Oil Consumption Division have	APPROVED	COTAINAL		19
here complied with and that the information rive	n is true and complete to the best of		SOF		
been complied with and that the information given is true and complete to the best of my knowledge and belief. BY BY					
,		TITLE SUPERVI	CONTRACT	:#3	
		TITLE			
		This form is to	be filed in compli	ence with RULE	1104.
Jan San Berner March			uest for allowable f		
(Signorwa)	7.30	well, this form mus	t be accompenied by	y a tabulation of	the deviction
Operations Manager	0, 20		well in accordance		
Operations hander		All tections of	this form must be f	Died out comple	tely for allow-
nfc 10'155'		able on new and re		. 157 ()	
<u> </u>	010000000000000000000000000000000000000	Fill out only	Sections 1, 11, 111, r, or transporter, or o	kng VI 101 Chan Ther auch changi	e of condition
(Date)			E C-104 must be fi		
	0,	Completed wells.			,
	(O) 11, 19, 1	`			
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