STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

PO. 00 ESPIES SE	****		
DISTRIBUTION		П	
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U.S.G.S.			
LANG OFFICE			
TRANSPORTER	916		
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OPERATOR			
PRORATION 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			
4.	SPORT OIL AND NATURAL GAS		
Meridian Oil Inc.			
Adress	•		
P. O. Box 4289, Farmington, NM 87499			
Reason(s) for liling (Check proper box)	Other (Please explain)		
New Well Change in Transporter of:	Meridian Oil Inc. is Operator		
	for El Paso Production Company		
Change in Change	Condensate		
If change of ownership give name El Paso Natural Gas Compand address of previous owner El Paso Natural Gas Comp	any, P. O. Box 4289, Farmington, NM 87499		
II. DESCRIPTION OF WELL AND LEASE			
Lease Name Well No. Pool Name, including F	Lease No.		
	Pictured Cliffs State. (Federal) or Fee SF 079392		
Location N QQQ			
Unit Letter N : 990 Feet From The South Line and 1600 Feet From The West			
Line of Section 20 Township 27N Bance	Era		
Line of Section 20 Township 2/N Range	5W , NMPM, Rio Arriba County		
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	I CAS		
Name of Authorized Transporter of Cit or Condensate X Address (Give address to which approved copy of this form is to be sent)			
W: 1' O'1 7			
ame of Authorized Transporter of Casinghead Gas or Dry Gas (A) Address (Give address to which approved copy of this form is to be repri-			
Northwest Pipeline Corp.	P. O. Box 8900, Salt Lake City, UT 84110		
If well produces oil or liquids, Unit , Sec. Twp. Rge.	Is das actually connected ? When we will appropriate the second of the s		
give location of tanza. N 20 27N 5W			
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	OIL CONSERVATION DIVISIONO		
I hereby certify that the rules and regulations of the Oil Conservation Division have	APPROVED		
been complied with and that the information given is true and complete to the best of my knowledge and belief.	BY_ Bird . Chang		
	SUPERVISION DISTRICT # 3		
	TITLE		
If this is a request for all quality delivery			
(Signature) Well, this form must be accompanied by a tabulation of the companied by a tabulation of the companied to a tabulation of the companied by a tabulation of t			
(Title) All sections of this form must be filled out completely for 11-1-86 able on new and recompleted wells.			
(Date) Fill out only Sections I, II, III, and VI for changes of owners make the second conditions of the second conditio			
NOV 01 1996			

OIL CON. DIV.