STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

			_
99. 00 199119 546	6 1948		
D167418UT	04	Ι	
SAMTA PE		Ι	
PILE			
U.B.Q.&,			
LAND OFFICE			
TRANSPORTER	016		
	•4	·	
OPERATOR			
PROPATION ARRIVE			

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

Form Cy104 Revised 10-01-78 Format 06-01-83 Page 1

REQUEST FOR ALLOWABLE

AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS I.			
Meridian Oil Inc.			
Address P. O. Box 4289, Farmington, NM 87499			
Respon(s) for filing (Check proper box) Change in Transporter of: Decemporation Decemp	Other (Piesse explain) Meridian Oil Inc. is Operator y Ges for El Paso Production Company		
If change of ewnership give name El Paso Natural Gas Compa	ny, P. O. Box 4289, Farmington, NM 87499		
II. DESCRIPTION OF WELL AND LEASE Lesse Name San Juan 27-5 Unit Well No. Pool Name, Including Formation So. Blanco Pi	C. Cliffs Ext. State, Federal or Fee SF 079391		
Unit Letter M : 1090 Feet From The South Line	• and 890 Feet From The West 5W NMPM. Rio Arriba Countr		
Meridian Oil Inc. Name of Authorized Transporter of Casinghead Gas or Dry Gas 1 El Paso Natural Gas Company If well produces oil or liquids, Unit Sec. Twp. Rge. give location of tanzs. M 7 27N 5W If this production is commingled with that from any other lease or pool.	P. O. Box 4289, Farmington, NM 87499 Address (Give address to which approved copy of this form is to be sent) P. O. Box 4289, Farmington, NM 87499 is gas actually connected? When When 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	OIL CONSERVATION DIVISION		
my knowledge and belief.	TITLE SUPERVISION DISTRICT # 3		
Drilling Clerk (Tule) 11-1-86 NOV 01 1986 OIL CON, DIV. DIST. 2	This form is to be filed in compliance with NULE 1104. If this is a request for allowable for a newly drilled or despended well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with NULE 111. All sections of this form must be filled out completely for allowable on new and recompleted wells. 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. Separate Forms C-104 must be filed for each pool in multiply completed wells.		