## STATE OF NEW MEXICO ENERGY AND MINERALS CEPARTMENT

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DISTRIBUTION			
SANTA PE		$\prod$	
FILE			
V.1.G.3.			
LAMO OFFICE			
TRANSPORTER	016		
	644	<u>l</u>	
OPERATOR.			
PRODATION 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 O

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS		
Meridian Oil Inc.		
P. O. Box 4289, Farmington, NM 87499		
Reason(s) for filing (Check proper box)	Other (Please explain)	
New Well Change in Transporter of:	meridian off inc. is operator	
	for El Paso Production Company	
If change of ownership give name El Paso Natural Gas Compa	ny, P. O. Box 4289, Farmington, NM 87499	
II. DESCRIPTION OF WELL AND LEASE		
San Juan 27-4 Unit 41 Basin Dakota	State(Federa) or Fee SF 080673	
Location K 1550 South Line Unit Letter : Feet From The	e andFeet From The	
Line of Section 7 Township 27N Fange	4W NMPM, Rio Arriba County	
Name of Authorized Transporter of Casingness Gas ar Dry Gas Annorthwest Pipeline Corp.  If well produces oil or liquids.	P. O. Box 4289, Farmington, NM 87499 Address (Give address to which approved copy of this form is to be sent) P. O. Box 8900, Salt Lake City, UT 84110  Is gas actually connected?  When  When  When  When  When  When  When	
NOTE: Complete Parts IV and V on reverse side if necessary.		
VI. CERTIFICATE OF COMPLIANCE	oir conséidháildu Bhaich	
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.	BY Sind Cham	
Drilling Clerk  (Tule)  11-1-86  (Date)	TITLE  SITTEVISION DISTRICT # 3  This form is to be filed in compilence with RULE '104.  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 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 filled for each pool in multiply completed wells.	