## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

DD. DF 1 DF110 S41	1740	$\Gamma$	
DISTRIBUTION			
SANTA PE		$\Gamma$	
FILE			
U.1.G.S.			
LAMO OFFICE			
TRANSPORTER	OIL		
	-		
OPERATOR.			
PROBATION OFFICE			

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

Form/C-104 Revised 10-01-78 Format 05-01-83 Page 1

## REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS		
Meridian Oil Inc.		
P. O. Box 4289, Farmington, NM 87499		
Respense   Fer filing (Check proper box)   Change in Transporter of:   Meridian Oil Inc. is Operator		
If change of ownership give name El Paso Natural Gas Compa and address of previous owner El Paso Natural Gas Compa	any, P. O. Box 4289, Farmington, NM 87499	
II. DESCRIPTION OF WELL AND LEASE  Lease Name San Juan 27-5 Unit  189 Basin Dakota	ormation Kind of Lease No.  State, Federal or Fee E-290-30	
Unit Letter B : 1000 Feet From The North Lin	e and 1740 Feet From The East	
Line of Section 32 Township 27N Range	5W , NMPM, Rio Arriba County	
Meridian Oil Inc.  Name of Authorized Transporter of Casinghead Gas or Dry Gas Northwest Pipeline Corp.  If well produces oil or liquids, give location of tanks.  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 8900, Salt Lake City, UT 84110  Is gas actually connected?  When	
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 my knowledge and belief.	OIL CONSERVATION DIVISION  APPROVED NOV U1 1986 19	
Drilling Clerk  (Tule) 11-1-86  NOV 01 1986	This form is to be filed in compliance with MULE 1104.  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 MULE 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.	

OIL CON. DIV.