## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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DISTRIBUTION		
SANTA PE		
FILE		
U.8.G.J.		
LANG OFFICE		
TRANSPORTER OIL		
GAS		
OPERATOR	$\Box$	
PROBATION OFFICE		

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

Form C-104 Revised 10-01-78 Format 06-01-83

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PRODATION OFFICE	PORT OIL AND NATURAL GAS CON
I.	PORT OIL AND NATURAL GAS
Meridian Oil Inc.	O/V
P. O. Box 4289, Farmington, NM 87499	
	Other (Please explain)  Meridian Oil Inc. is Operator for El Paso Production Company
If change of ownership give name El Paso Natural Gas Compaend address of previous owner El Paso Natural Gas Compa	ny, P. O. Box 4289, Farmington, NM 87499
Lease Name  San Juan 27-4 Unit  Description of Well Arb Lease  Well No. Pool Name, Including Fo	Cedse No.
Unit Letter G; 2010 Feet From The North Line Line of Section 28 Township 27N Range	e and 1690 Feet From The East  4W . NMPM, Rio Arriba County
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	
Meridian Oil Inc.	P. O. Box 4289, Farmington, NM 87499
Name of Authorized Transporter of Casinghedd Gas or Dry Gas Northwest Pipeline Corp.	P. O. Box 8900, Salt Lake City, UT 84110
If well produces all or liquids, give location of tanks.  Unit Sec. Twp. Rgs.  G 28 27N 4W	ls gas actually connected? When
I this production is commingled with that from any other lease or pool, NOTE: Complete Parts IV and V on reverse side if necessary.	give commingling order number:
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION NOV 01 1986
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.	APPROVED 1917 0 1 1300 19
	TITLE SUPERVISION DISTRICT # 3

completed wells.

Seggira Joak	
(Signature)	
Drilling Clerk	
(Tule) 11-1-86	
(Date)	

This form is to be filed in compliance with RULE 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 AULE 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