STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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DISTRIBUTION			
BANTA PE			
FILE			
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LANG OFFICE			
TRANSPORTER	OIL		
	944		
OPERATOR			
PROBATION OFFICE			

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

Form C-104 Revised 10-01-78 Format 08-01-83 Page 1

TRANSPORTER CIL	REQUEST FOR ALLOWABLE			
I. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS				
Meridian Oil Inc.		_		
Address				
P. O. Box 4289, Farmingto	n, NM 87499			
Reason(s) for filing (Check proper box)	Other (Piesse explain) Change in Transporter of: Momidian Oil Transporter			
Recompletion	meridian oil inc. is Operator			
X Change in/Classical Operatorshi		for El Paso Production Company		
If change of ownership give name E1 P. and address of previous owner E1 P.	aso Natural Gas Comp	any, P. O. Box 4289, Farmington, NM 87499		
II. DESCRIPTION OF WELL AND LEASE				
San Juan 27-5 Unit	Well No. Pool Name, including Formation Kind of Lease Lease 196 Blanco Mesa Verde State, (Federal by Fee SE 079403			
Location	Didnes Hesa	Verde State, (Federal)or Fee SF 079403		
Unit Letter L : 1900 Feet From The South Line and 888 Feet From The West				
Line of Section 15 Township	27N	Tr.		
Cine of Section	, Z/IN Range	DW NMPM, Rio Arriba County		
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS				
Meridian Oil Inc. Address (Give address to which approved copy of this form is to be sent)				
Name of Authorized Transporter of Casinghead Gas or Dry Gas (A) Address (Give address to which approved copy of this form is to be read.				
Northwest Pipeline Corp. P. O. Box 8900, Salt Lake City, UT 84110				
If well produces oil or liquids, Unit give location of tanzs.	15 27N 5W	ls qus actually connected? when		
If this production is commingled with the	from any other lease or pool,	give commingling order number:		
NOTE: Complete Parts IV and V on I	reverse side if necessary.			
VI. CERTIFICATE OF COMPLIANCE OIL CONSERVATION DIVISION				
		NOV 0.1 1986		
been complied with and that the information given is true and complete to the best of				
my knowledge and belief.				
		TITLE SUPERVISION DISTRICT #3		
This form is to be filed in compliance with MULE 1104.				
(Signature)		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		
Drilling	Clerk	tests taken on the well in accordance with AULE 111.		
(Tule) 11-1-86		All sections of this form must be filled out completely for silowable on new and recompleted wells.		
Fill out only Sections I, II, III, and VI for changes of o well name or number, or transporter, or other such change of cond				
	Paiven I	Separate Forms C-104 must be filed for each pool in multiply completed wells.		
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