

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES REQUIRED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.A.	
LAND OFFICE	
TRANSPORTER	OIL
	NATURAL GAS
OPERATOR	
REGISTRATION OFFICE	

OIL CONSERVATION DIVISION
P. O. BOX 2038
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78
Form: 05-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED
NOV 01 1988
OIL CON. DIV.
SANTA FE

I. **Operator**
Meridian Oil Inc.

Address
P. O. Box 4289, Farmington, NM 87499

Reason(s) for filing (Check proper box)

☐ New Well	☐ Change in Transporter oil	☐ Other (Please explain)
☐ Recompletion	☐ Oil	☐ Dry Gas
☒ Change in Ownership	☐ Gashead Gas	☐ Condensate

Meridian Oil Inc. is Operator for El Paso Production Company

If change of ownership give name and address of previous owner: El Paso Natural Gas Company, P. O. Box 4289, Farmington, NM 87499

II. DESCRIPTION OF WELL AND LEASE

Lease Name E-11-D-05-Pah	Well No. 1	Pool Name, including Formation Ballard Pictured Cliffs	Kind of Lease State (Federal) or Free
Location Unit Letter M, 1140 Feet From The South Line and 1140 Feet From The West Line of Section 19, Township 26N, Range 8W, NMPM, San Juan			

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil Meridian Oil Inc.	or Condensate	Address (Give address to which approved copy of this form is to be sent) P. O. Box 4289, Farmington, NM 87499
Name of Authorized Transporter of Gashead Gas El Paso Natural Gas Company	or Dry Gas	Address (Give address to which approved copy of this form is to be sent) P. O. Box 4289, Farmington, NM 87499
If well produces oil or liquids, give location of tanks.	Unit M, Sec. 19, Twp. 26N, Rge. 8W	Is gas actually connected? when

If this production is commingled with that from any other lease or pool, give commingling order number:

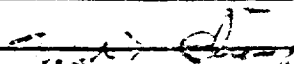
NOTE: Complete Parts IV and V on reverse side if necessary.

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 my knowledge and belief.


(Signature)
Drilling Clerk
(Title)
11-1-86
(Date)

OIL CONSERVATION DIVISION

APPROVED NOV 01 1988
BY 
TITLE SUPERVISOR, DISTRICT # 7

This form is to be filed in compliance with RULE 1.
If this is a request for allowable for a newly drilled well, this form must be accompanied by a tabulation of tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely on new and recompleted wells.
Fill out only Sections I, II, III, and VI for change of well name or number, or transporter, or other such change.
Separate Forms C-103 must be filed for each pool completed wells.