STATE OF NEW MEXICO ENERGY AND MINERALS CEPARTMENT Form C-104 Revised 10-01-78 DISTRIBUTION OLL CONSERVATION DIVISION Format 06-01-83 SANTA PE P. O. BOX 2088 FILE U.S.O.J. SANTA FE, NEW MEXICO 87501 LANG OFFICE TRANSPORTED REQUEST FOR ALLOWABLE OPERATOR PROBATION OFFICE AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS! Meridian Oil Inc. P. O. Box 4289, Farmington, NM 87499 Reason(s) for filing (Check proper bos) Other (Please explain) New Yeti Chance in Transporter of: Meridian Oil Inc. is Operator 011 Dry Ges for El Paso Production Company Change in Chinese NO Deratorship Casingheed Ges Condensate If change of ownership give name El Paso Natural Gas Company, P. O. Box 4289, Farmington, NM 87499 II. DESCRIPTION OF WELL AND LEASE west Kutz Pic. Cliffs Ext. Ballard Kind 91 Lease Lease No. NM 03154 State, Federal or Fee Location E 1650 North 790 West eet From The Line and Unit Letter Feet From The 15 26N 9W San Juan Line of Section Township NMPM County III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Cit or Condensate Addiess (Give dadress to which approved copy of this form is to be sent) Meridian Oil Inc. Box 4289. Farmington, NM 87499 Elmaso Natural Gas Company or Cry Gas A Address G. ve address which approved copy of the 187 496 of sens Zen Ryw s gas detudity connected? #hen If well croduces oil or liquids. The Manager and The Control of the C give location of tante. 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. OIL CONSERVATION DIVISION VI. CERTIFICATE OF COMPLIANCE NOV 0.1 1986 I hereby certify that the rules and regulations of the Oil Conservation Division have APPROVED been complied with and that the information given is true and complete to the best of my knowledge and belief. SUPERVISION DISTRICT # 3 TITLE _ This form is to be filed in compliance with mulg 1104. If this is a request for allowable for a newly drilled or deepened (Signature) well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with AUL \$ 111. Drilling Clerk All sections of this form must be filled out completely for slice-(Tile) able on new and recompleted wells. 11-1-86 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

completed wells.

(Date)