## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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DISTRIBUTION			
SANTA FE			
PILE			
U.8.G.8,			
LAND OFFICE			
TRANSPORTER	DIL		
	GAS		
OPENATOR			
PROMATION OFFICE			

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

Form C-104 Revised 10-01-78 Format 06-01-83 Page 1

Separate Forms C-104 must be filed for each rool in multiple

## REQUEST FOR ALLOWABLE AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
I.	TORY OLD MATORIAL DAG		
Obelatal			
Merrion Oil & Gas Corporation			
Address S40 Day S40 Day	, DECEIVED		
P. O. Box 840, Farmington, New Mexico 87499			
Reason(s) for Isling (Check proper box)	Other (Please explain);		
New Well Change in Transporter of:	MAY 2 1 1985		
	Oil COAL Date		
Change in Ownership Cazinghead Gas 🛆 Ca	ondenage OIL CON. DIV.		
If change of ownership give name	DIST. 3		
and address of previous owner			
II. DESCRIPTION OF WELL AND LEASE	. •		
Lease Name Well No. Pool Name, Including F	ormation Kind of Lease Lease No.		
Delhi Taylor C l Basin Dakota -	State, Federal or Fee Federal SF 07864		
Location			
Unit Letter M : 790 Feet From The South Lin	ne and 790 Feet From The West		
Line of Section 4 Township 26N Range	11W NMPM, San Juan County		
	·		
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	LGAS Address (Give address to which approved copy of this form is to be sent)		
Name of Authorized Traitsporter of Condensate or Condensate			
The Mancos Corporation  Name of Authorized Transporter of Casinghead Casinghead or Dry Casinghead	P. O. Box 1320. Farmington. New Mexico 87499 Address (Give address to which approved copy of this form is to be sent)		
El Paso Natural Gas Co.  Unit Sec. Twp. Rge.	P. O. Box 4289, Farmington, New Mexico 87499 Is gas actually connected? When		
If well produces oil or liquids, M 4 26N , 11W	Yes 3/59		
If this production is commingled with that from any other lease or pool,	give comminging order number:		
NOTE: Complete Parts IV and V on reverse side if necessary.			
	OIL CONSERVATION DIVISION		
VI. CERTIFICATE OF COMPLIANCE			
I hereby certify that the rules and tegulations of the Oil Conservation Division have-	APPROVED		
been complied with and that the information given is true and complete to the best of	Trank 1 1000		
my knowledge and belief.	BY		
I = I	TITLE SUPERVISOR DISTRICT # 3		
	main face to be filled to social according to the		
Hu Hinl	This form is to be filed in compliance with MULE 1104.  If this is a request for allowable for a newly drilled or deepens		
(Signature) well, this form must be accompanied by a tabulation of the			
Stove S. Dunn, Operations Manager tests taken on the well in accordance with MULE 111.			
(Title)	All sections of this form must be filled out completely for allow able on new and recompleted wells.		
5/31/85 Fill out only Sections I, II, III, and VI for changes			
(Date)	well name or number, or transporter, or other auch change of condition		

completed wells.