STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

(Signalwe)

(Dose)

Operations Manager

| **. ** ***** *** | | | |
|------------------|-----|---|--|
| DISTRIBUTION | | | |
| SANTA FE | | | |
| FILE | | • | |
| U.B.O.A. | | | |
| LAND OFFICE | | | |
| TRANSPORTER | OIL | | |
| | DAL | | |
| OPERATOR | | | |
| 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

| OAS | REQUEST FOR ALLOWABLE | | |
|--|--|---|--|
| OPERATOR | | AND | |
| PROBATION OFFICE | AUTHORIZATION TO TR | ANSPORT OIL AND NATURAL GAS A SECOND STATE OF THE SECOND STATE OF | |
| L | | | |
| Obetatot | | | |
| Merrion Oil & | Gas Corp. | | |
| Address | | • | |
| P. O. Box 840, | Farmington, New Mexico | 87499 | |
| Reason(s) for liling (Check prope | er box) | Other (Please explain) | |
| New Well | Change in Transporter of: | | |
| Recompletion | X Oil Dry Gas | | |
| Change in Ownership | Casinghead Cas Condensate | | |
| | | | |
| change of ownership give na | | | |
| and address of previous owner | | | |
| II. DESCRIPTION OF WELL | AND LEASE | • | |
| Lease Name | Well No. Pool Nome, Includ. | ng Formation Kind of Lease Lease No. | |
| Chartier | 1 Gallegos Ga | 11up State, Federal or Fee Federal SF-08110 | |
| Location | | | |
| Unit Letter M | 790 Feet From The South | Line and 790 Feet From The West | |
| Line of Section 4 | Township 26N Range | 12W NMPM, San Juan County | |
| | • | | |
| <u>III. DESIGNATION OF TR</u> | ANSPORTER OF OIL AND NATU | RAL GAS Address (Give address to which approved copy of this form is to be sent) | |
| Name of Authorized Transporter | of Ctl 🔀 er Condensate 🗀 | | |
| Conoco Transpo | ortation, Inc. | P. O. Box 1429, Bloomfield, NM 87413 | |
| Name of Authorized Transporter | of Cosinghead Gos or Dry Gas | Address (Cive address to which approved copy of this form is to be sent) | |
| at North and a standar | Unit Sec. Twp. Re- | . Is gas octually connected? When | |
| If well produces oil or liquids, give location of tanks. | M 4 26N 1 | 2W Yes : 1957 | |
| | | | |
| if this production is commingle | ed with that from any other lease or p | coi, give comminging of or number. | |
| NOTE: Complete Parts IV | and V on reverse side if necessary. | | |
| VI. CERTIFICATE OF COM | PLIANCE | OIL CONSERVATION DIVISION | |
| I hereby certify that the tules 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, 19 | |
| | | BY | |

This form is to be filed in compliance with MULE 1104.

If this in 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 AULK 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 completed wells.