

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES REQUIRED	
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SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
OPERATOR	GAS
PRODUCTION OFFICE	

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

Form C-104
Revised 10-01-79
Format 08-01-81
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REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
Meridian Oil Inc.

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

Reason(s) for filing (Check proper box)
☐ New Well
☐ Recombination
☒ Change in Operatorship
 Change in Transporter of:
☐ Oil
☐ Casinghead Gas
☐ Dry Gas
☐ Condensate
 Other (Please explain)
 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 Huerfanito Unit	Well No., Pool Name, including Formation 87 Basin Dakota	Kind of Lease State, (Federal) or Fee SF 078135
Location Unit Letter K : 1550 Feet From The South Line and 1750 Feet From The West Line of Section 1 Township 26N Range 9W 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 Casinghead 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 lease. Unit K	Sec. 1	Twp. 26N Rge. 9W

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
NOV 01 1986

APPROVED
BY
TITLE SUPERVISION DISCHARGE #3

This form is to be filed in compliance with RULE 11.
 If this is a request for allowable for a newly drilled or recompleted well, this form must be accompanied by a tabulation of the flow and tests taken on the well in accordance with RULE 111.
 All sections of this form must be filled out completely, even if applicable on new and recompleted wells.
 Fill out only Sections I, II, III, and VI for changes in operator, well name or number, or transporter, or other such change of ownership.
 Separate Forms C-104 must be filed for each pool or multiple completed wells.