

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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U.S.G.M.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
REGISTRATION OFFICE	

OIL CONSERVATION DIVISION
P. O. BOX 2048
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-79
Format 06-01-83
Page 1

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REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator Meridian Oil Inc.	
Address P. O. Box 4239, Farmington, NM 87499	
Reason(s) for filing (Check proper box)	
☐ New Well	Change in Transporter of:
☐ Recompletion	☐ Oil
☒ Change in Ownership	☐ 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 4239, Farmington, NM 87499

II. DESCRIPTION OF WELL AND LEASE

Lease Name Huerfano Unit	Well No. 37	Pool Name, including Formation Blanco Mesa Verde	Kind of Lease State (Federal) or Fee	Lease No. SF 073135
Location				
Unit Letter K	1550	Feet From The South	Line and 1750	Feet From The West
Line of Section 1	Township 26N	Range 9W	San Juan	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒	Address (Give address to which approved copy of this form is to be sent)
Meridian Oil Inc.	P. O. Box 4239, Farmington, NM 87499
Name of Authorized Transporter of Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Company	P. O. Box 4239, Farmington, NM 87499
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is this actually connected? when
	K 1 26N 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.

OIL CONSERVATION DIVISION

NOV 01 1986

APPROVED _____, 1986

BY _____

TITLE SUPERVISOR

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation test taken on the well in accordance with RULE 1111.
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 well, well name or number, or transporter, or other such change of ownership.
Separate Forms C-104 must be filed for each pool in multiply completed wells.

(Signature)
Drilling Clerk

(Title)
11-1-86

(Date)