

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P. O. BOX 2098

SANTA FE, NEW MEXICO 87501

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

REQUEST FOR ALLOWABLE
AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NOV 01 1986
OIL CONSERVATION DIV.

I. Operator
Meridian Oil Inc.

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

Reason(s) for filing (Check proper box)
☐ New Well
☐ Recompleted
☒ Change in Ownership
☐ Change in Transporter of:
☐ Oil
☐ Gas
☐ Dry Gas
☐ Condensate
☐ Casinghead Gas
☐ 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

Well Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Luthv	2	So. Blanco Fm. Cliffs Ext.	State/Federal/Free	SF 07862
Location Unit Letter <u>K</u> , <u>1650</u> Feet From The <u>South</u> line and <u>1490</u> Feet From The <u>West</u> Line of Section <u>1</u> Township <u>26N</u> Range <u>8W</u> NMPM, 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 4289, Farmington, NM 87499
Name of Authorized Transporter of Casinghead 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 4289, Farmington, NM 87499
If well produces oil or liquids, give location of tanks.	Is gas actually connected?
Unit <u>K</u> , Sec. <u>1</u> , Twp. <u>26N</u> , Rge. <u>8W</u>	

If this production is commingled with that from any other lease or pool, give commingling order number:

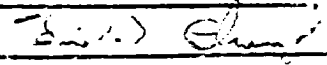
NOTE: Complete Parts IV and V on reverse side if necessary.

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
(Date)
11-1-86
(Date)

OIL CONSERVATION DIVISION

APPROVED _____
BY 
TITLE SUPERVISION DISTRICT

This form is to be filed in compliance with RULE 11.4
If this is a request for allowable for a newly drilled or recompleted well, this form must be accompanied by a tabulation of the production tests taken on the well in accordance with RULE 11.4.
All sections of this form must be filled out completely or it is not allowable on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes in well name or number, or transporter, or other such change of production.
Separate Forms C-104 must be filed for each pool in newly completed wells.