STATE OF NEW MEXICO ENERGY AND MINIERALS GEPARTMENT

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U.S.G.4.		
LAND OFFICE		
TRANSPORTER DIL		
144		
OPERATOR		
PROBATION OFFICE		

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

Form 0-104 Revised 10-01-78 Format 06-01-83 Page 1

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REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL CA

I. AUTHORIZATION TO TRANS	SPORT OIL AND NATURAL GAS CHE TO THE SPORT OIL AND NATURAL GAS
Operator Meridian Oil Inc.	
Address	
P. O. Box 4289, Farmington, NM 87499	
Reason(s) for liling (Check proper box)	Other (Please explain)
New Wet! Change in Transporter of:	Meridian Oil Inc. is Operator
	for El Paso Production Company
X Change in Chief Casinghest Gas Casinghast Gas	Condensate
If change of awnership give name El Paso Natural Gas Compand address of previous owner El Paso Natural Gas Compa	any, P. O. Box 4289, Farmington, NM 87499
II. DESCRIPTION OF WELL AND LEASE	
Lecase Name West No. Pool Name, including F Huerfano Unit 197 Basin Dakota	ormation Kind of Lease Lease No.
Huerfano Unit 197 Basin Dakota	State (Federa) or Fee NM 02515
Unit Letter I 1800 Feet From The South Cir	800 East
Line of Section 28 Township 26N Range	10W San Juan
. Gride	, NMPM, Sall Stall County
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	LGAS
Name of Authorized Transporter of Cit 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 Authorizes Transporter of Casinghead Gas ar Ory Gas A El Paso Natural Gas Company	P. O. Box 4289, Farmington, NM 87499
If well produces oil or liquids, Unit Sec. Twp. Rgs. I 28 26N 10W	is das detudity connected? when
f this production is commingled with that from any other lease or pool,	
NOTE: Complete Parts IV and V on reverse side if necessary.	
To the Complete Part IV that V on Veverse side if necessary,	1
7I. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION
hereby certify that the rules and regulations of the Oil Conservation Division have	NOV 01 1986
een complied with and that the information given is true and complete to the best of	APPROVED 19119 19 19
ny knowledge and belief.	BY
	TITLESUPERVISION DISTRICT # 3
Segies Joak	This form is to be filed in compliance with MULE 1104.
(Signature) Drilling Clerk	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 tests taken on the well in accordance with AULE 111.
(Tule) 11-1-86	All sections of this form must be filled out completely for silow- able on new and recompleted wells.
(Date)	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.