

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1
RECEIVED
DEC 19 1985
OIL CON. DIV
DIST. 3

I.

Operator MERIDIAN OIL INC.	
Address Post Office Box 4289, Farmington, New Mexico 87499	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership	Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate Correction of lease number

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Burroughs State	Well No. #1E	Pool Name, including Formation Basin Dakota	Kind of Lease State, Federal or Fee	State E-3	Lease 148-9
Location					
Unit Letter K	1450	Feet From The South	Line and 1820	Feet From The West	
Line of Section 36	Township T26N	Range R11W	San Juan Co.		

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Giant Refining Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 256, Farmington, N.M. 87499				
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 4289, Farmington, N.M. 87499				
If well produces oil or liquids, give location of tanks.	Unit K	Sec. 36	Twp. 26N	Rge. 11W	Is gas actually connected? When

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.

Alan Alexander
ALAN ALEXANDER (Signature)
District Land Manager
(Title)
December 17, 1985
(Date)

OIL CONSERVATION DIVISION
APPROVED DEC 19 1985
BY Frank J. [Signature]
TITLE SUPERVISOR DISTRICT #3

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deep well, this form must be accompanied by a tabulation of the dev tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for a able on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of ov well name or number, or transporter, or other such change of condi
Separate Forms C-104 must be filed for each pool in mul completed wells.