STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

(Date)

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TRANSPORTER	016		
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OPERATOR			
PRODATION OFFICE			

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

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

REQUEST FOR ALLOWABLE

A	ND STATE OF THE ST
AUTHORIZATION TO TRANS	PORT OIL AND NATURAL GAS
l.	
Meridian Oil Inc.	84 % 3
Address	
P. O. Box 4289, Farmington, NM 87499	
Rosson(s) for filing (Check proper box)	Other (Please explain)
New Well Change is Transporter el:	Meridian Oil Inc. is Operator
Recompletion UI OII D	for El Paso Production Company
Change In/Child ICE Operatorship Casinehous Gas Ca	ondensete ·
of change of ownership give name El Paso Natural Gas Compa	iny, P. O. Box 4289, Farmington, NM 87499
II. DESCRIPTION OF WELL AND LEASE	
Huerfano Unit Well No. Pool Name, including F. 174E Basin Dakota	State, Federal or Fee
L 1850 South	1190 West
= = = = = = = = = = = = = = = = = = = =	te and Feet From The
13 26N	10W San Juan
Line of Section Township Range	NMPM, County
Meridian Oil Inc. Name of Authorized Transporter of Casingheda Gas or Ory Gaz A El Paso Natural Gas Company	P. O. Box 4289, Farmington NM 87499 Address (Give address to which approved copy of this form is to be sent) P. O. Box 4289, Farmington, NM 87499 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. Unit Sec. 700. Rage of 10W give location of tanks.	(a 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	OIL CONSERVATION DIVISION
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.	BY 3 C
	TITLE SUPERVISION DISTRICT # 3
Signature)	This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or despens well, this form must be accompanied by a tabulation of the deviation
Drilling Clerk	tests taken on the well in accordance with AULE 111. All sections of this form must be filled out completely for allow
(Tule) 11-1-86	able on new and recompleted wells.

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.