

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

23. OF COPIES REQUIRED	
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SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
OPERATOR	ELP
PROBATION OFFICE	

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

Form C-104
Revised 10-11-78
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator Meridian Oil Inc.	
Address P. O. Box 4289, Farmington, NM 87499	
Reason(s) for filing (Check proper box)	Other (Please explain)
☐ New Well ☐ Recompletion ☒ Change in Ownership Operatorship	Meridian Oil Inc. is Operator for El Paso Production Company
Change in Transporter of: ☐ Oil ☐ Gashead Gas ☐ Dry Gas ☐ Condensate	

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 Turner B Com K	Well No. 17	Pool Name, including Formation Ballard Pictured Cliffs	Kind of Lease Leasing, Federal or Fee	Lease No. E-8441
Location				
Unit Letter A	970	Feet From The North	Line and 790	Feet From The East
Line of Section 36	Township 26N	Range 8W	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 Gashead 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? when
Unit A	Sec. 36
Twp. 26N	Rge. 8W

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
(Title)
11-1-86
(Date)

OIL CONSERVATION DIVISION

APPROVED NOV 01 1986, 19
BY [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 reopened well, this form must be accompanied by a regulation of the division tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for a new or 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.