STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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DISTRIBUTION		Ι	
SANTA PE			
FILE			
V.8.G.8.			
LANG OFFICE			
TRAMSPOITER	OIL		
	-		
OPERATOR			
PROBATUM 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 AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.	TON TOTE AND NATORAL DAS		
Meridian Oil Inc.			
P. O. Box 4289, Farmington, NM 87499			
Reason(s) for filing (Check proper box)	Other (Please explain)		
New Wett Change in Transporter of: Meridian Oil Inc. is Operator			
Recompletion UII UI	for El Paso Production Company		
Change in Chicket Conference Con Control Contr	ondensete .		
If change of ownership give name El Paso Natural Gas Compa and address of previous owner El Paso Natural Gas Compa	iny, P. O. Box 4289, Farmington, NM 87499		
II. DESCRIPTION OF WELL AND LEASE			
Leese Name Well No. Pool Name, including F			
San Juan 28-4 Unit 13 Blanco Mesa V	Verde State, Foderal pr Foo SF 079729		
Unit Letter N 840 Feet From The South Lin	e and 1700 Feet From The West		
Line of Section 20 Township 28N Range	4W NMPM, Rio Arriba County		
Merician Oil Inc. Name of Authorized Transporter of Casinghead Gas or Dry Gas X El Pasio Natural Gas Company If well produces oil or liquids. give location of tanks. Name of Authorized Transporter of Casinghead Gas or Dry Gas X El Pasio Natural Gas Company 15 well produces oil or liquids. N 20 28N 4W	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 P. O. Box 4289, Farmington, NM 87499 Is gas actually connected?		
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.			
	1		
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION		
	NOV 01 1986		
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	APPROVED, 19		
my knowledge and belief.	BY S.A.) G		
Charles Control of the Control of th			
	TITLE SUPERVISION DISTRICT #3		
	This form is to be filed in compliance with RULE 1104.		
May Look	If this is a request for allowable for a newly drilled or deepened		
(Signature)	well, this form must be accompanied by a tabulation of the deviation		
Drilling Clerk	tests taken on the well in accordance with AULE 111.		
(Tule)	All sections of this form must be filled out completely for allowable on new and recompleted wells.		
11-1-86	Fill out only Sections I. II. III, and VI for changes of owner,		
(Date)	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.		