STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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DISTRIBUTION			
SANTA PE			
FILE			
U.8.G.4.			
LAMO OFFICE			
TRANSPORTER	014		
	-		
OPERATOR			
PROBATION 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

<u>I.</u>			
Operator Meridian Oil Inc.			
Address			
P. O. Box 4289, Farmington, NM 87499	•		
Reason(s) for filing (Check proper box)	Other (Please explain)		
New Well Change in Transporter of:	Meridian Oil Inc. is Operator		
Recompletion OII Dr	y Ges for El Paso Production Company		
Change INCOMMINION Operatorship Casinghood Gas Co	endensate :		
If change of ownership give name El Paso Natural Gas Compa	ny, P. O. Box 4289, Farmington, NM 87499		
II. DESCRIPTION OF WELL AND LEASE			
Lease Name Well No. Pool Name, including Fo	ormation Kind of Lease Lease No.		
San Juan 28-5 Unit 30A Blanco Mesa V	Verde State, Federal or (**) Fee		
Location			
Unit Letter D : 1100 Feet From The North Lin	e and 800 Feet From The West		
Line of Section 22 Township 28N Range	5W NMPM, Rio Arriba County		
THE DESIGNATION OF TRANSPORTER OF OH AND NATIONAL CAS			
Name of Authorized Transporter of Cit or Condensate & Against (Give address to which approved copy of this form is to be sent)			
Additional to the second secon			
Meridian Oil Inc. P. O. Box 4289, Farmington, NM 87499 Name of Authorized Transporter of Casinghed Gas ar Dry Gas Address (Give address to which approved copy of this form is to be sent)			
El Paso Natural Gas Company Unit Sec. Twp. Rge.	is gas actually connected? , when		
If well produces oil or liquids, give location of tanks. D 22 28N 5W	to the the transfer of the tra		
If this production is commingled with that from any other lesse or pool, give commingling order number:			
NOTE: Complete Parts IV and V on reverse side if necessary.			
II CONCEDIATION CIVICION			
VI. CERTIFICATE OF COMPLIANCE	NOV - 1 isoo		
I hereby certify that the rules and regulations of the Dil Conservation Division have APPROVED			
been complied with and that the information given a true and complete to the best of my knowledge and belief.			
	TITLE SUPERVISION 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 d (Signature) Well, this form must be accompanied by a tabulation of the d			
		Drilling Clerk (Tule) Drilling Clerk	
able on new and recompleted wells. 11-1-86 Fill out only Sections I. II. III. and VI for changes o			
(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.		