STATE OF NEW MEXICO ENERGY MO MINERALS DEPARTMENT

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TRANSPORTER	014		
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OPERATOR			
POREATION OFFICE			

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

Form C-104 Revised 10-01-78 Format 08-01-83 Page 1

REQUEST FOR ALLOWABLE

PROBATION TO TRANSP	-	
Operator Meridian Oil Inc.		
P. O. Box 4289, Farmington, NM 87499		
Reason(s) for filing (Check proper bes)	Other (Picase explain)	
New Well Change in Transparter el:	Meridian Oil Inc. is Operator	
	for El Paso Production Company	
X Change in Change in Change in Change in Control Con Con	ndensete	
If change of empership give name El Paso Natural Gas Comparand address of previous owner El Paso Natural	ny, P. O. Box 4289, Farmington, NM 87499	
and address of previous owner		
II. DESCRIPTION OF WELL AND LEASE		
Lease Name Well No. Pool Name, inclusing Fo		
Kutz Deep Test A 1 Fulcher Kutz F	Pictured Cliffs State (Fodered) or Foo SF 077383A	
Location	1050 Fact	
Unit Letter J : 1550 Feet From The South Line	and 1850 Feet From The East	
201 - 201	10W NMPM, San Juan County	
Line of Section 22 Township 28N Range	10W , NMPM, Sail Oddii Stim,	
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	CAS	
Name of Authorized Transporter of Cit or Congenette	Aggress (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 Casinghedd Gas or Dry Gas 📉	P. O. Box 4289, Farmington, NM 87499 Address (Give address to which approved copy of this form is to be sent)	
Southern Union Gathering Co.	P. O. Box 1899, Bloomfield, NM 87413	
Unit Sec. Two. Rge.	Is gas actually connected? When	
if well produces oil or liquids. give location of tanks. J 22 28N 10W	the temperature and	
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.		
	OIL CONSERVATION DIVISION	
VI. CERTIFICATE OF COMPLIANCE	, 🗘 🧸 ি উত্তৰ্গ	
I hereby certify that the rules and regulations of the Oil Conservation Division have	APPROVED, 19	
been complied with and that the information given is true and complete to the best of	BY Baral-) Clara	
my knowledge and belief.	•	
	TITLE SUPERVISION DISTRICT # 3	
	This form is to be filed in compliance with RULE 1104.	
eggy and	If this is a request for allowable for a newly drilled or despense	
(Signature)	wall this form must be accompanied by a labulation of the deviation	
Drilling Clerk	tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for silow	
(Tule) 11-1-86	able on new and recompleted wells.	
11-11-86	Fill aut only Services 7 If III, and VI for changes of owner,	
(Doje)	well name or number, or transporter or other such change of conditions	
	Separate Forms C-104 must be filed for each pool in multiply completed wells.	