STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

	41740	<u> </u>	
DISTRIBUTION		Γ	Γ
SAMTA PE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	-	\cdot	
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

Separate Forms C-104 must be filed for each pool in multiply completed wells.

REQUEST FOR ALLOWABLE AND

AUTHORIZATION TO TRANSF	PORT OIL AND NATURAL GAS		
Decreased Meridian Oil Inc.			
Address			
P. O. Box 4289, Farmington, NM 87499			
looson(s) for filing (Check proper box) Other (Please explain)			
New Well Change in Transporter of:	Meridian Oil Inc. is Operator		
	for El Paso Production Company		
X Change InXXIIIIXIOPeratorship Casinghead Gas Co	Hoensda		
If change of ownership give name El Paso Natural Gas Compa	ny. P. O. Box 4289, Farmington, NM 87499		
and address of previous owner			
II. DESCRIPTION OF WELL AND LEASE	ormation Kind of Lease Lease No.		
Lesse Name Well No. Pool Name, Including Fo	1		
San Juan 29-4 Unit 24 E. Blanco Pict	cured Cliffs State (Federal) or Fee SF 079757		
B 1220 North	e and 2250 Feet From The East		
Unit Letter Feet From The Line			
Line of Section 8 Township 29N Range	4W , NMPM, Rio Arriba County		
Meridian Oil Inc. Name of Authorized Transporter of Casinghead Gas or Dry Gas Northwest Pipeline Corp. If well produces oil or liquids, a give location of tanks. Name of Authorized Transporter of Casinghead Gas or Dry Gas Northwest Pipeline Corp.	P. O. Box 4289, Farmington, NM 87499 Address (Give address to which approved copy of this form is to be sent) P. O. Box 8900, Salt Lake City, UT 84110 Is gas actually connected?		
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.			
NOIE: Complete Parts IV and V on reverse side if necessary.	II		
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION		
I hereby certify that the rules and regulations of the Oil Conservation Division have	APPROVED 1947 - 1 1985 19		
been complied with and that the information given is true and complete to the best of	ATT /		
my knowledge and belief.	BY		
	TITLE TOTALOT & S		
	This form is to be filed in compliance with MULE 1104.		
1320 x rah	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 tests taken on the well in accordance with RULE 111.		
Drilling Clerk	All sections of this form must be filled out completely for allow-		
(Tule) 11-1-86	able on new and recompleted wells.		
(Date)	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.		