STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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DISTRIBUTION			
BAMTA PE			
FILE			
U.S.O.S.		Ι	
LAND OFFICE			
TRANSPORTER	OIL		
	BAB		
OPERATOR			
PRORATION 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

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
Operator			
Meridian Oil Inc.			
P. O. Box 4289, Farmington, NM 87499			
Reason(s) for filing (Check proper box)	Other (Please explain)		
New Well Change in Transporter of:	Change in Transporter of: Meridian Oil Inc. is Operator		
Recompletion Company			
X Change in XOLONIA Company Control Co	indensate :		
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 Well No. Pool Name, including Fo	ormation Kind of Lease Lease No.		
San Juan 29-7 Unit 75 Blanco Mesa Ve	:rue () ree		
	e and 1750 Feet From The East		
Line of Section 23 Township 29N Range	7W NMPM, Rio Arriba County		
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	CAS		
Name of Authorized Transporter of Cil 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 Casinghead Gas or 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.	P. O. Box 4289, Farmington, NM 87499		
if well produces oil or liquids, give location of tanks. G 23 29N 7W	1977 The programme of the Comment of		
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.			
NOTE. Complete latts if and to an reverse size of necessary.	OIL CONSERVATION DIVISION		
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION		
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.	The second secon		
my knowledge and benefit	- Description of the second of		
	TITLE SUPERVISION CLICK AND A		
The Charles	This form is to be filed in compliance with RULE 1104.		
(Signature)	If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation		
Drilling	tests taken on the well in accordance with AULE 111.		
(Tule) 11-186/	All sections of this form must be filled out completely for allowable on 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.		
(Date)	Separate Forms C-104 must be filled for each pool in multiply		
	completed wells.		
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