## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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DISTRIBUTION		T	Т
SANTA PE			
FILE			
U.S.Q.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	948		
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

C PROBATION OFFICE [ ]	PORT 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:	Meridian Oil Inc. is Operator
Recompletion Oil D	for F1 Page Production Company
	for El Paso Production Company
If change of ownership give name El Paso Natural Gas Compa	any, P. O. Box 4289, Farmington, NM 87499
II. DESCRIPTION OF WELL AND LEASE    Well No.   Pool Name, Including F	ormation Kind of Lease No.
San Juan 29-7 Unit 112 Basin Dakota	
Location 112 Basin Darota	State (Federal) or Fee SF 078503
Unit Letter M : 1150 Feet From The South Lin	se and 800 Feet From The West
Line of Section 29 Township 29N Range	7W , NMPM. Rio Arriba County
	110 1111100
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	GAS
Name of Authorized Transporter of Oil or Condensate	Andrews (Give address to which approved copy of this form is to be sent)
Meridian Oil Inc.	P O Roy 1289 Farmington NM 87400
Name of Authorized Transparter of Casinghead 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)
El Paso Natural Gas Company	D. O. Boy 4200 Formington Mr 07400
Unit Sec. Twp. Rge.	P. O. Box 4289, Farmington, NM 87499
If well produces oil or liquids, give location of tanks. M 29 29N 7W	The state of the s
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.	
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION
I hereby certify that the rules and regulations of the Oil Conservation Division have	APPROVED A 19
been complied with and that the information given is true and complete to the best of my knowledge and belief.	By Bir Chang
-	TITLE SUPERVISION DISTRICT # 5
j i i i i i i i i i i i i i i i i i i i	TITLE DOI BATTE
	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
Ding Clerk	tests taken on the well in accordance with RULE 111.  All sections of this form must be filled out completely for allow 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.
NOV-1 1980	Separate Forms C-104 must be filed for each pool in multiply completed wells.