STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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DISTRIBUTION			
SANTA PE			
FILE			
V.4.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
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

I. AUTHORIZATION TO TRANS	SPORT OIL AND NATURAL GAS
Operator	
Meridian Oil Inc.	
P. O. Box 4289, Farmington, NM 87499	
Recson(s) for filing (Check proper box)	Other (Please explain)
New Well Change in Transporter of:	1
	Meridian Oil Inc. is Operator
	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 Lease No.
San Juan 29-7 Unit 112M Blanco Mesa Ve	20020 1101
Location 112M DIGITO MESA VE	erde State Federal or Fee SF 078503
Unit Letter C : 790 Feet From The North Lin	ne and 1560 Feet From The West
Unit Letter;reet From TheLin	re and
Line of Section 29 Township 29N Range	7W , NMPM, Rio Arriba County
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	L GAS [Address (Give address to which approved copy of this form is to be sent)
<u> </u>	
Meridian Oil Inc. Name of Authorized Transporter of Casinghed Gas of Dry Gas (X)	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	
Unit Sec. Two. Rgs.	P. O. Box 4289, Farmington, NM 87499
If well produces oil or liquids, and liquids, are location of tanks.	The Manager of the Control of the Co
If this production is commingled with that from any other lease or pool,	give comminging order number:
	are committed order manuscript
NOTE: Complete Parts IV and V on reverse side if necessary.	
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION
	NOV - '
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	APPROVED, 19
my knowledge and belief.	BY . 3.1)
	A STATE AS
	TITLE SUPERVISION DISTRICT # &
Segue Loak	This form is to be filed in compliance with RULE 1104.
(Signature)	If this is a request for allowable for a newly drilled or deepene well, this form must be accompanied by a tabulation of the deviation
Dri fling Clerk	tests taken on the well in accordance with RULE 111.
(844) 188 A	All sections of this form must be filled out completely for allow
11-1-86	able on new and recompleted wells. Fill out only Sections I. II. III, and VI for changes of owner.
(Date)	well name or number, or transporter, or other such change of condition
	Barress Same C 104 be fited for such and to