STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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DISTRIBUTION			T
SANTA FE			
FILE			
U.S.O.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
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

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS				
1. Operator				
Meridian Oil Inc.				
Address				
P. O. Box 4289, Farmington, NM 87499				
Reason(s) for filing (Check proper box)	Other (Please explain)			
New Well Charge in Transporter of: Meridian Oil Inc. is Operator				
Recompletion Oil Dr	for El Paso Production Company			
	andensere			
If change of ownership give name E1 Paso Natural Gas Company, P. O. Box 4289, Farmington, NM 87499				
and address of previous owner				
II. DESCRIPTION OF WELL AND LEASE				
Lease Name Well No. Pool Name, including Fo	ormation Kind of Lease Lease No.			
San Juan 29-7 Unit 31E Basin Dakota	State. Federal or Fee B-10037-46			
Location				
Unit Letter A : 800 Feet From The North Line and 910 Feet From The East				
20 201	7			
Line of Section 32 Township 29N Range	7W , NMPM, Rio Arriba County			
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	GAS			
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 87400			
Name of Authorized Transporter 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	P. O. Box 4289, Farmington, NM 87499			
If well produces oil or liquids, Unit Sec. Twp. Rgs.	Is gas actually connected?			
give location of tances. A 32 29N 7W				
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.				
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION			
VI. CERTIFICATE OF COMPHIANCE	1.00			
I hereby certify that the rules and regulations of the Oil Conservation Division have	BY BY TISEDICT # 3			
been complied with and that the information given is true and complete to the best of my knowledge and belief.	Bin & Chang			
my knowledge and Schei.	SUPERVISION DISTRICT #3			
	TITLE SUPERVISION DISTRICT			
	This fam is to be filled in compliance with any 5 and			
Caru - Jak	This form is to be filed in compliance with RULE 1104. 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 allowable on new and recompleted wells.			
11x-1286	Fill out only Sections I. II. III. and VI for changes of owner,			
Nov ENE	well name or number, or transporter, or other such change of condition. Separate Forms C-104 must be filed for each pool in multiply completed wells.			