STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

	1140		
DISTRIBUTION			
BANTA FE			
FILE			
U.4.0.A.			
LAMO OFFICE			
TRAMEPORTER	رة		
OPERATOR.			
2222422			

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			
T. Operator			
Meridian Oil Inc.			
Address			
P. O. Box 4289, Farmington, NM 87499			
Reason(s) for filing (Check proper box)	Other (Please explain)		
Now Well Charge in Transporter of:			
	For El Paso Production Company		
X Change IN CHANGE IN CHANGE COM COMMISSION	Authority		
If change of ownership give name El Paso Natural Gas Comp	any, P. O. Box 4289, Farmington, NM 87499		
and address of previous ownerEI Faso Natural Gas Comp			
II. DESCRIPTION OF WELL AND LEASE			
Lesse Name	[a a a		
San Juan 29-7 Unit 130 Basin Dakot	a Stere, Fodered of Fee SF 078424		
Location Court Court	ine and 1400 Feet From The West		
Unit Letter K 2025 Feet From The South	ine and 1400 Feet From The West		
Line of Section 21 Township 29N Range	7W NMPM, Rio Arriba County		
Line of Section ZI Township Z5N Range			
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURA	L GAS		
Name of Authorized Transporter of CII or Congensate &	Vadiess (Cine desirate to much abbutter table of		
Meridian Oil Inc.	P. O. Box 4289, Farmington, NM 87499 Address (Give address to which approved copy of this form is to be sent)		
Name of Authorized Transporter of Casinghedd Gas or Dry Gas A			
El Paso Natural Gas Company	P. O. Box 4289, Farmington, NM 87499		
If well produces oil or liquids. give location of tanks. K 21 29N 7W	· · · · · · · · · · · · · · · · · · ·		
If this production is commingled with that from any other lesse or pool			
NOTE: Complete Parts IV and V on reverse side if necessary.			
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION		
	NOV - 1 1500		
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	C AFFROVES		
my knowledge and belief.	BY CALL		
,	TITLESUPPRIVIOUS		
	DOUBLE TO DISTRICT # 3		
	This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepene		
(Signature)	Il wall this form must be accompanied by a (abulation of the deviction		
Drilling Clerk	tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allow		
	lebie 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		
Up. C.D.	Separate Forms C-104 must be filed for each pool in multiply		
	completed wells.		
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