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NEW MEXICO OIL CONSERVATION COMMISSION
SANTA FE, NEW MEXICO
CERTIFICATE OF COMPLIANCE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

FORM C-110
 (Rev. 7-60)

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

Company or Operator El Paso Natural Gas Company				Lease Sunray		Well No. 3	
Unit Letter E	Section 5	Township 29-N	Range 8-W	County San Juan			
Pool Undesignated Pictured Cliffs				Kind of Lease (State, Fed, Fee) Federal			
If well produces oil or condensate give location of tanks			Unit Letter	Section	Township	Range	
Authorized transporter of oil <input type="checkbox"/> or condensate <input checked="" type="checkbox"/> El Paso Natural Gas Products Company				Address (give address to which approved copy of this form is to be sent)			
Is Gas Actually Connected? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>							
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/> El Paso Natural Gas Company			Date Connected	Address (give address to which approved copy of this form is to be sent) Box 990, Farmington, New Mexico			

If gas is not being sold, give reasons and also explain its present disposition:

REASON(S) FOR FILING (please check proper box)

New Well ☒ Change in Ownership ☐
 Change in Transporter (check one) Other (explain below)
 Oil ☐ Dry Gas ☐
 Casing head gas . ☐ Condensate.. ☐

Remarks



The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 11 day of October, 19 61.

OIL CONSERVATION COMMISSION		By
Approved by Original Signed by A. R. KENDRICK		Original Signed D. W. Meehan
Title PETROLEUM ENGINEER DIST. NO. 3		Title Petroleum Engineer
Date		Company El Paso Natural Gas Company
OCT 13 1961		Address Box 990, Farmington, New Mexico

STATE OF NEW MEXICO		
COUNTY OF SANTA FE		
TOWN OF SANTA FE		
WARRANT OF ARREST		
FOR		
SANTA FE		
TOWN		
COUNTY		
TOWN OFFICE		
TRANSPORT R	01	
PROSECUTION OFFICE	7	
OPERATOR		



LTR



Job separation sheet

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OPERATOR	
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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. Operator
Meridian Oil Inc.

Address
P. O. Box 4289, Farmington, NM 87499

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	<input type="checkbox"/> Change in Transporter of:	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	<input type="checkbox"/> Condensate
<input checked="" type="checkbox"/> Change in Ownership Operatorship	<input type="checkbox"/> Casinghead Gas	

Other (Please explain)
Meridian Oil Inc. is Operator for El Paso Production Company

If change of ownership give name and address of previous owner: El Paso Natural Gas Company, P. O. Box 4289, Farmington, NM 87499

II. DESCRIPTION OF WELL AND LEASE

Lease Name Sunray	Well No. 3	Pool Name, including Formation Blanco Undesignated Pictured Cliffs	Kind of Lease State, (Federal) or Fee	Lease No. SF 078487C
Location				
Unit Letter E	1750	Feet From The North	Line and 1150	Feet From The West
Line of Section 5	Township 29N	Range 8W	NMPM, San Juan	County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS


Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	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 <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	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, give location of tanks.	Unit, Sec., Twp., Rge.
	E 5 29N 8W
Is gas actually connected? when	


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

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.


(Signature)
Drilling Clerk


(Date)

OIL CONSERVATION DIVISION

APPROVED _____, 19____
BY 
TITLE SUPERVISION 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 deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

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.

Separate Forms C-104 must be filed for each pool in multiply completed wells.