## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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DISTRIBUTION			
SANTA PE			
FILE			
U.S.G.S.			
LAND OFFICE		$\vdash$	
TRANSPORTER	OIL	$\Box$	
	GAS	·	
OPERATOR			
PROBATION OFFICE			

## OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

Form £-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 TRANSPORT OIL AND NATURAL GAS			
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		
	for El Paso Production Company		
X Change in Chinace (Control of Casinghead Gas C	ondensate		
If change of ownership give name El Paso Natural Gas Compand address of previous owner El Paso Natural Gas Compa	any, P. O. Box 4289, Farmington, NM 87499		
II. DESCRIPTION OF WELL AND LEASE			
Lease Name Well No. Pool Name, including F	ormation Kind of Lease Lease No.		
San Juan 30-6 Unit 62X Blanco Mesa	Verde State, Federat or f(ee ) Fee		
Location			
Unit Letter M : 985 Feet From The South Lin	ne and 990 Feet From The West		
Line of Section 28 Township 30N Range	6W NMPM, Rio Arriba County		
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS			
Name of Authorized Transporter of Cil or Condensate Andress (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 or Dry Gas Address (Give address to which approved copy of this form is to be sent)			
Northwest Pipeline Corp.  P. O. Box 8900, Salt Lake City, UT 84110			
Unit Sec. Two. Box.	Is gas actually connected? when		
of well produces oil or liquids, give location of tanks.  M 28 30N 6W	ान गानवक्षत्रकाराम्यकाराम् ।		
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			
been complied with and that the information given is true and complete to the best of			
my knowledge and belief.	BY		
	TITLE SIMPNIVESTON DISTRICT # 3		
Jessy Loak	This form is to be filed in compliance with MULE 1104.		
(Signature) well, this form must be accompanied by a tabulation of			
Drilling Clerk	tests taken on the well in accordance with AULE 111.		
(Tule)  All sections of this form must be filled out completely fall 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.		
	Separate Forms C-104 must be filed for each pool in multiply completed wells.		