## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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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

## REQUEST FOR ALLOWABLE

PROBATION OFFICE AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS		
I. Operator Meridian Oil Inc.		
Address P. O. Box 4289, Farmington, NM 87499		
Resson(s) for filing (Check proper box)  Now Well Change in Transporter of:  Recompletion Dry	Other (Picase explain) Meridian Oil Inc. is Operator for El Paso Production Company	
If change of ownership give name El Paso Natural Gas Compared address of previous owner El Paso Natural Gas Compared Description of the Compar	ny, P. O. Box 4289, Farmington, NM 87499	
II. DESCRIPTION OF WELL AND LEASE  Lease Name San Juan 30-4 Unit Location	cured Cliffs State.(Federal) or Fee SF 079487	
Unit Letter 0 : 800 Feet From The South Line Line of Section 22 Township 30N Range	and 1550 Feet From The East  4W NMPM, Rio Arriba County	
Name of Authorized Transporter of Casinghead Gas or Dry Gas A Northwest Pipeline Corp.  If well produces oil or liquids.  give location of tanza.	P. O. Box 4289, Farmington, NM 87499 Address (Give address to which approved copy of this form is to be sent)  P. O. Box 8900, Salt Lake City, UT 84110  Is gas actually cannected?  When	
If this production is commingled with that from any other lease or pool.  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  (Tule)  11-1-86  (Date)	OIL CONSERVATION DIVISION  APPROVED  TITLE  This form is to be filed in compliance with RULE 1104.  If this is a request for allowable for a newly drilled ar deepens 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 to the completed wells.  Separate Forms C-104 must be filed for each pool in multiple completed wells.	
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