STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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DISTRIBUTION			T
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U.S.G.S.			
LANG OFFICE			Т
TRANSPORTER	01L		Г
	646		
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

	SPORT OIL AND NATURAL GAS			
Operator Monidian Oil T				
Meridian Oil Inc.				
P. O. Box 4289, Farmington, NM 87499				
Reason(s) for filing (Check proper box)				
Uner (Please explain)				
Meridian Uil Inc. is Operator				
Y Change to Western On a mark a mark in	for El Paso Production Company			
If change of appropriate size some				
If change of ownership give name El Paso Natural Gas Compand and address of previous owner El Paso Natural Gas Comp	any, P. O. Box 4289, Farmington, NM 87499			
II. DESCRIPTION OF WELL AND LEASE Leese Name Well No. Pool Name, including	Formation Kind of Legse			
Com Tiene 20 4 ** 1:	Ledse No.			
Location	SE 079483A			
Unit Letter L : 1589 Feet From The South Line and 941 Feet From The West				
Line of Section 9 Township 30N Range	4W , NMPM, Rio Arriba County			
III DESIGNATION OF TRANSPORTER OF OF AND ALLERS				
Name at Authorized Transporter of Cit Concensate Andrews (Give address to which approved copy of this form is to be sent)				
Maridian Oil Too				
Name of Authorized Transporter of Casinghed Gas or Dry Gas (A) Address (Give address to which approved carry of the form of th				
Northwest Pipeline Corp. P. O. Box 8900, Salt Lake City, UT 84110				
If well produces oil or liquids, Unit Sec. Twp. Rgs.	Is gas actually connected 2. When the Transport of the Manager of the Transport of the Tran			
give location of tanza. L 9 30N 4W				
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.				
	84 causas			
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 Dwg Za / a City of Carlot Carlo			
Star V / 1	This form is to be filed in compliant			
Dague took	If this is a request for allowable			
(Signature) Drilling Clerk	well, this form must be accompanied by a (400481200 of the deviation tests taken on the well in accordance with AULE 111.			
(Title) All sections of this form must be filled out completely for all				
11-1-86 sole on new and recompleted wells.				
(Date) Fill out only Sections I, II, III, and VI for change o well name or number, or transporter, or other such change o				
	Separate Forms C-104 must be filled for each pool in multiply			
**************************************	completed wells.			