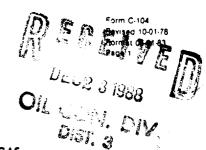
## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

	* 14 6 0	
DISTRIBUTION		
SANTA FE		
FILE		
V.1.0.5.		
LAND OFFICE		
TRANSPORTER	OIL	
	8 44	
OPERATOR		
PROBATION OFFICE		

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



## REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.				
Operator				
Meridian Oil Inc.				
Address				
3535 E. 30th-Farmis Recentation for filing (Check proper box)	igton. NM 87401	Other (Please explain) T.C		
1	Change in Transporter of:	Other (Please explain) Effective Date: 10/01/88		
Recompletion	OII Dry Com Change in name of Operator			
Change in Ownership	Casinghead Gas X Co	ndensate Transporter		
operator	_			
and address of previous owner Beta	Development Co	238 Petroleum Plaza, Farmington, NM 874		
	A C.T.			
II. DESCRIPTION OF WELL AND LE	Nell No. Pool Name, including Fo	primation Kind of Lease No		
Rock Island Federal	l Basin Dako	ta State, Federal or Fee Federal 3390-01		
Location				
Unii Letter M : 890	Feet From The West Line	and 1090 Feet From The South		
	-			
Line of Section 9 Township	29N Range 1	OW , NMPM, San Juan County		
THE PROPERTY OF THE AMERICAN	ED OF OUR AND MATTERAL	CAS		
Name of Authorized Transporter of Cit or Condensate Address (Give address to which approved copy of this form is to be sent)				
Meridian Oil Inc.		3535 E. 30th-Farmington, NM 87401		
Name of Authorized Transporter of Casinghed	ad Gas Or Dry Gas A	Address (Give address to which approved copy of this form is to be sent)		
El Paso Natural Gas Co. P.O. Box 990-Farmington, NM 87401				
If well produces oil or liquids, Unit	Sec. Twp. Rge.	Is gas actually connected? When		
give location of tanes.	$\frac{4}{1}$ 9 29N 10V			
If this production is commingled with the	t from any other lesse or pool.	give commingling order number:		
NOTE: Complete Parts IV and V on I				
-				
VI. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION DIVISION DEC 22 1983		
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		Janes Shand		
my knowledge and belief.	!	SUDEDUTCTON DISCRITTON # 2		
	j	TITLE SUPERVISION DISTRICT # 3		
( A Kadi	-	This form is to be filed in compliance with MULE 1104.		
Mahue	4	If this is a request for allowable for a newly drilled or deepen-		
Regulatory Aff	airs	well, this form must be accompanied by a tabulation of the deviati tests taken on the well in accordance with RULE 111.		
		All sections of this form must be filled out completely for allo-		
December 22, 1	988	able on new and recompleted wells.  Fill out only Sections I, II, III, and VI for changes of owner		
(Date)		well name or number, or transporter, or other such change of condition		
		Separate Forms C-104 must be filed for each pool in multiple		
	7)	l completed wells.		