STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

	11710	
DISTRIBUTION		
SANTA FE		
FILE		
U.8.G.A.		
LAND OFFICE		
TRANSPORTER	OIL	
	-	
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

Î	
Meridian Oil INC.	
Address	
3535 E. 30th-Farmington, NM 87401	
Resson(s) for filing (Check proper box)	Other (Please explain) Effective Date: 12/06/88
New Well Change in Transporter of:	211eccive bace. 12/00/88
	Change in name of Operator/and
Change in Ownership Casinghead Gas X Co	ondensate Transporter
Operator name TEXACO INC -P O BOY	
If change of owners give name TEXACO INCP.O. Box and address of previous owner	EE, Cortez, CO. 81321
II. DESCRIPTION OF WELL AND LEASE	·
Legae Name Well AND LEASE Legae Name Well No. Pool Name, including Fo	ormation Kind of Lease No.
GArrett Fed Com 2 lEBasin	Dakota State, Federal or Fee Fee
Location	
Unit Letter M : 1040 Feet From The S Lin	e and 1000 Feet From The W
	• • •
Line of Section 13 Township 29N Range	11W , NMPM, San Juan County
The state of the s	
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL 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 Casingnead Gas or Dry Gas	Address (Give address to which approved copy of this form is to be sent)
EPNG CO.	FArmington, NM 87401
if well produces oil or liquids, Unit Sec. Twp. Rgs.	Is gas actually connected? When
give location of tanks. M 13 29N 11W	Yes
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.	
NOIE: Complete Farts IV and V on reverse side if necessary.	11
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION
I hereby certify that the rules and regulations of the Oil Conservation Division have	APPROVED DEC 23 1988 19
been complied with and that the information given is true and complete to the best of	
my knowledge and belief.	BY
	TITLE SUPERVISION DISTRICT # 5
	This form is to be filed in compliance with RULE 1104.
I Studdened	If this is a request for allowable for a newly drilled or deepens
(Signature)	well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.
Regulatory Affairs	All sections of this form must be filled out completely for allo-
(Title)	able on new and recompleted wells.
December 22, 1988	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
(Date)	Separate Forms C-104 must be filed for each pool in multiply
	completed wells.