STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

DISTRIBUTION		Г	
SANTA PE		Γ	
FILE			
V.1.0.3,			
LAND OFFICE			
TRANSPORTER	OIL		
	-	$ \cdot $	
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

	ND PORT OIL AND NATURAL GAS	
Operated 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	
Recognition Oil D	for El Paso Production Company	
	ondensate to the raso Froduction Company	
If change of ownership give name El Paso Natural Gas Compa and address of previous owner El Paso Natural Gas Compa	iny, P. O. Box 4289, Farmington, NM 87499	
II. DESCRIPTION OF WELL AND LEASE [Weil No.] Pool Name, Including F	ormation Kind of Lease Lease No.	
	Costo No.	
Feuille A 5E Basin Dakota	State (Federal) or Fee SF 078197	
Unit Letter K : 1510 Feet From The South Lin		
Line of Section 4 Township 29N Range	10W , NMPM, San Juan County	
Name of Authorized Transporter of Cit or Condensate Meridian Oil Inc. Name of Authorized Transporter of Casinghead Gas or Dry Gas A El Paso Natural Gas Company If well produces oil or liquids, que location of tanks. K 4 29N 10W	P. O. Box 4289, Farmington, NM 87499 Address (Give address to which approved copy of this form is to be sent) P. O. Box 4289, Farmington, NM 87499 1s gas actually connected? When	
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.	av : Tank of /	
	TITLE SUPERVISION DISTRICT # 5	
/ / / / / / /	This form is to be filed in compliance with RULE 1104.	
May & Soule (Signature)	If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation	
Drilling Clerk (Tule)	tests taken on the well in accordance with AULE 111. All sections of this form must be filled out completely for allow	
11-1-86		
(Date)	Fill out only Sections I, II, 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.	