

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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U.S.G.A.	
LAND OFFICE	
TRANSPORTER	OIL
OPERATOR	GAS
PRODUCTION 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

JUN 11 1986

CON. DIV.
DIST. 3

I. Operator
Meridian Oil Inc.
Address
P. O. Box 4289, Farmington, NM 87499

Reason(s) for filing (Check proper box)

☐ New Well	☐ Change in Transporter of:	☐ Dry Gas
☐ Recompletion	☐ Oil	☒ Condensate
☐ Change in Ownership	☐ Casinghead Gas	

Other (Please explain)
Meridian Oil Inc. is an Agent for Meridian Oil Production Inc.

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease name San Juan	Well No. 24	Pool Name, including Formation Basin Dakota	Kind of Lease State (Federal) or Fee	Lease NM 029146
Location				
Unit Letter <u>L</u>	<u>2000</u> Feet From The <u>South</u> Line and <u>1060</u> Feet From The <u>West</u>			
Line of Section <u>33</u>	Township <u>29N</u>	Range <u>9W</u>	N.M.P.M., <u>San Juan</u>	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒	Address (Give address to which approved copy of this form is to be sent)
Meridian Oil Inc.	P. O. Box 1599, Aztec, New Mexico 87410
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Company	P. O. Box 4289, Farmington, NM 87499
If well produces oil or liquids, give location of tanks.	Is gas actually connected? ☐ When _____
Unit <u>L</u> , Sec. <u>33</u> , Twp. <u>29N</u> , Rge. <u>9W</u>	

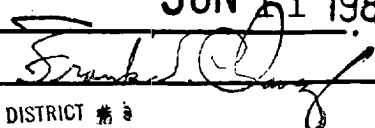
If this production is commingled with that from any other lease or pool, give commingling order number: _____

NOTE: Complete Parts IV and V on reverse side if necessary.

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
(Title)
6-1-86
(Date)

OIL CONSERVATION DIVISION
JUN 11 1986
APPROVED _____
BY 
TITLE SUPERVISOR DISTRICT #3

This form is to be filed in compliance with RULE 1106.
If this is a request for allowable for a newly drilled or deep well, this form must be accompanied by a tabulation of the dev tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for use on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of a well name or number, or transporter, or other such change of conditions.
Separate Forms C-104 must be filed for each pool in multi-completed wells.