STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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TRAMPORTER CAS	\	REQUEST FO	R ALLOWABLE
OPERATOR	/		ND
PROBATION OFFICE	AUTHORIZAT		PORT OIL AND NATU
<u>I.</u>			
Meridian Oil Inc.			
Address			
P. O. Box 4289, Farm	nington NM 8740	α	
Reason(s) for filing (Check proper			
			Other (Pleas
New Woll	Change in Trans	perter el:	Meridia
Recompletion	<u> </u>	<u> </u>	y Gee for El
X Change INCLININIES Operat	orship Cesneheed	0∞	ndensete
<u> </u>			
If change of ownership give name and address of previous owner.	El Dogo Motumo	1 Caa Camaa	D O D 4
and address of previous owner _	El Paso Natura	<u> Las Compa</u>	ny, P. O. Box 4
II. DESCRIPTION OF WELL A			
Louse Name	Well No. Pool	Name, including Fo	ermettoe
Sunray D	1 Ba	sin Dakota	
Location			
Unit Later M : 9	an		000
		Couth . *	
Unit Letter M : 9	Feet From The	South Line	and990
01	Foundation 30N	South Line	10W NMPM
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Line of Section 21	SPORTER OF OIL A	Range ND NATURAL	10W NMPM
III. DESIGNATION OF TRAN	SPORTER OF OIL A	Range ND NATURAL	10W , NMPM GAS Aggress (Give address i
III. DESIGNATION OF TRANSpare of Authorized Transporter of Meridian Oil Inc.	SPORTER OF OIL A	Pange ND NATURAL 310 (2)	GAS Aggress (Give address of P. O. Box 4289
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Form C-104 Revised 10-01-78 Formal 06-01-83 Page 1 ATION DIVISION OX 2088

Separate Forms C-104 must be filed for each pool in multiply completed wells.

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OPERATOR	AND				
	SPORT OIL AND NATURAL GAS				
Cpercer	NOV 1 1886				
Meridian Oil Inc.	ON COR CAV.				
P. O. Box 4289, Farmington, NM 87499					
Respon(s) for tiling (Check proper box)					
	Other (Please explain) c.				
Now Well Change in Transporter of:	Meridian Oil Inc. is Operator				
	for El Paso Production Company				
X Change INCHANNEROPERATORShip Commenced Gas 🛚 🖸	condensete				
If change of ownership give name no page None and Good					
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	•				
II. DESCRIPTION OF WELL AND LEASE [Weil No.] Pool Name, including F	ormation Kind of Lease Lease No.				
Sunray D 1 Basin Dakota	Course Ivo.				
Location Dasin Dakota	State, (Federal) or Fee SF 078204				
Unit Letter M : 990 Feet From The South Lin	ne and 990 Feet From The West				
Unit Letter M : 990 Feet From The SOUTH Lin	ne and 990 Feet From The West				
Line of Section 21 Township 30N Pange	10W NMPM. San Juan County				
	1977 June 187 Ball Oddil County				
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	L GAS				
Name of Authorized Transporter of CII or Condensate	Againes (Give address to which approved copy of this form is to be sent)				
Meridian Oil Inc.	P. O. Box 4289, Farmington, NM 87499				
Name of Authorized Transporter of Casingness Gas ar 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. Unit Sec. Twp. Rgs.	le gas actually connected? When				
give location of tanta. M 21 30N 10W	The Market Market				
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 COMPILANCE	OIL CONSERVATION DIVISION				
VI. CERTIFICATE OF COMPILANCE	NOV - 1800				
hereby certify that the rules and regulations of the Oil Conservation Division have	APPROVED, 19				
been complied with and that the information given is true and complete to the best of my knowledge and belief.	Tank Same				
ny monteage and better.	BY				
	TITLE SUPERVISION DISTRICT # 3				
$\mathcal{L}_{\mathcal{L}}}}}}}}}}$	This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or despendent				
Stania Josef					
(Signature)	well, this form must be accompanied by a tabulation of the deviation				
Drilling Clerk	teste taken on the well in accordance with RULE 111.				
(Tule)	All sections of this form must be filled out completely for allowable on new and recompleted wells.				
11-1-86	Fill out only Sections I. II. III. and VI for changes of owner,				
(Date)	well name or number, or transporten or other such change of condition.				