

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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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

I. Operator

MERIDIAN OIL INC.

Address

P.O. BOX 4289, FARMINGTON, NM 87499

Reason(s) for filing (Check proper box)

- ☐ New Well
☐ Recompletion
☐ Change in Ownership

Change in Transporter of:

- ☐ Oil
☐ Gas
☐ Condensate

Other (Please explain)

POOL NAME & DEDICATION CHANGE

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name TURNER COM	Well No. Pool Name, including Formation 250 BASIN FRUITLAND COAL	Kind of Lease State, Federal or Fee	Lease # SF-078128
Location Unit Letter K : 1595 Feet From The South Line and 855 Feet From The West Line of Section 7 Township 30N Range 9W, NMPLA, San Juan County			

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

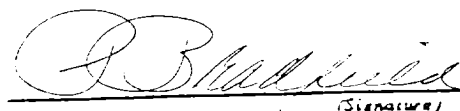
Name of Authorized Transporter of Oil or Condensate MERIDIAN OIL INC.	Address (Give address to which approved copy of this form is to be sent) P.O. BOX 4289, FARMINGTON, NM 87499
Name of Authorized Transporter of Gas or Dry Gas EL PASO NATURAL GAS COMPANY	Address (Give address to which approved copy of this form is to be sent) P.O. BOX 4289, FARMINGTON, NM 87499
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? when

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.



REGULATORY AFFAIRS

(Title)

DECEMBER 27, 1988

(Date)

OIL CONSERVATION DIVISION

APPROVED JAN 03 1989 12

BY

TITLE SUPERVISION DISTRICT # 8

This form is to be filed in compliance with NMLX 1104.

If this is a request for allowable for a newly drilled or deep well, this form must be accompanied by a tabulation of the devt tests taken on the well in accordance with NMLX 111.

All sections of this form must be filled out completely for a well on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of 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.