STATE OF NEW MEXICO ENERGY MO MINERALS DEPARTMENT

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LAMO OFFICE			
TRAMSPORTER	016		
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OPERAT CO			
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OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE. NEW MEXICO 87501

Form C-104 Revised 10-01-78 Format 06-01-63 FEB2 71987

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

000000	ALLUWABLE	
888848181818181818181818181818181818181	AND SPORT OIL AND NATURAL GAS	
AUTHORIZATION TO TRANS	PORT OIL AND NATURAL GAS	
Operator	D.S.T. 2	
Meridian Oil Inc.		
Address No. 1000 F. 1000		
P. O. Box 4289, Farmington, NM 87499		
Roosen(s) for filing (Check proper box)	Other (Piraze expiain)	
	Charge in Transporter et: Meridian Oil Inc. is Operator	
	1 TOT LT Faso Froduction Company	
X Change IN Change IN Change IN Castnehood Ges C	and encere	
If change of ewnership give name El Paso Natural Gas Compand address of previous owner El Paso Natural Gas Compa	any, P. O. Box 4289, Farmington, NM 87499	
ing sections of bigging of the sections of the section of the se		
T DESCRIPTION OF WELL AND LEASE 13/01/02	$\partial \mathcal{W}$	
II. DESCRIPTION OF WELL AND LEASE WELL NO. POOL Name, including F	ormation Kind of Lease Lease No.	
	ed Cliffs Ext. Siene, Federal or Fee SF 078120A	
	Siere, Y weerel or P ee	
C 1115 North	1800 West	
Unit Letter Feet From The Lir	ne and Feet From The	
Une of Section 35 Township Pange	12W San Juan	
Line of Section Township Range	, rain, County	
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<u>III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL</u>	L GAS	
Name of Authorized Transporter of Cit or Condensate	Andress (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 Casingheda 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	
Unit Sec. Twp. Rgs.	is gas actually connected? when	
if well produces oil or liquids. C 35 31N 12W		
give location of lanes.		
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	OIL CONSERVATION DIVISION AT 1007	
	FEB/27 1987	
I hereby certify that the rules and regulations of the Oil Conservation Division have	APPROVED	
been complied with and that the information given is true and complete to the best of	1) 9000000	
my knowledge and belief.	BY	
	SUPERVISOR DISTRICT # 3	
	TITLE	
	This form is to be filed in compliance with RULE 1104.	
and brak	If this is a request for allowable for a newly drilled or deepened	
(Signature)	well, this form must be accompanied by a tabulation of the deviation	
Drilling Clerk	tests taken on the well in accordance with AULE 111.	
(Tule)	All sections of this form must be filled out completely for allow-	
11-1-86	able on new and recompleted wells.	
	Fill out only Sections I. II. III. and VI for changes of owner.	
(Dese)	well name or number, or transporter, or other such change of condition.	

completed wells.