Submit 5 Copies Appropriate District Office P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410

Printed Name

Date

2-24-89

P.O. Drawer DD, Artesia, NM 88210

			BLE AND AUTHORIZAT	TION	
I.	TO TRANS	PORT OIL	AND NATURAL GAS		
Operator				Well API No.	
MERIDIAN OIL INC.					
Address				1	
21 Desta Drive	Midland. Texas	70705			
Reason(s) for Filing (Check proper box)	midiand, lexas	79705	Other (Please explain)		
New Well	Change in Tran	enanter of:			
Recompletion		Gas 🔲	Effective	e 2-1 -89	
=======================================	= 2.7	idensite			
If change of country and same					
and address of previous operator Doy	le Hartman	P.O. Box	1861 Midland,	Texas 79702	
II. DESCRIPTION OF WELL A	ND I EACE				
Lease Name		1 1 1 - 1 - 1		Kind of Lease	
Hodge		2			Least No.
Location		Jalmat(G	as)-Yates -SR	State Federal or Fee	
Location					
Unit Letter B	:2310 Feet	t From The	E Line and 330	Feet From The	N Line
				_	
Section 8 Township	24-S	ge 37-	E , NMPM,	Lea	County
H. DESIGNATION OF TRANS		AND NATU			
Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which approved copy of this form is to be sent)			s to be sent)
Name of Authorized Transporter of Casinghead Gas or Dry Gas XX			Address (Give address to which approved copy of this form is to be sent)		
El Paso Natural Gas Co			l .		9978
If well produces oil or liquids, rive location of tanks.	Unit Sec. Twy	p. Rge.	Is gas actually connected?	When ?	
			yes	August, 19	54
VI. OPERATOR CERTIFICA	TE OF COMPLIA	ANCE			
I hereby certify that the rules and regulations of the Oil Conservation			OIL CONSERVATION DIVISION		
Division have been complied with and the	at the information given ab	ove			
is true and complete to the best of my knowledge and belief.			Date ApprovedMAR ' 8 19		R 1989
/ la		// a. /	Date Approved		11 1000
- Colle	Marcell	all	_		
Signature			By ORIGINAL SIGNED BY JERRY SEXTON		
<u>Connie Monahan Oper</u>	ations Tech II	I		DISTRICT I SU	PERVISOR

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.

Title

2) All sections of this form must be filled out for allowable on new and recompleted wells.

Title

Telephone No.

915/686-5681

- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.