

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

NAME OF WELL	
DISTRICT	
COUNTY	
SECTION	
TOWNSHIP	
RANGE	
NEED FOR WATER	
NEED FOR GAS	
NEED FOR OIL	
NEED FOR NATURAL GAS	

OIL CONSERVATION DIVISION

P.O. BOX 2003
SANTA FE, NEW MEXICO 87501

Form O-104
Revised 10-1-79
Expires 06-01-83
Page 1

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REQUEST FOR ALLOWABLE
AND
ALLOCATION TO TRANSPORT OIL AND NATURAL GAS

Company: Meridian Oil Inc.

Address: P. O. Box 4239, Farmington, NM 87499

☐ New Well ☐ Re-completions ☒ Change in Ownership	☐ Change in Terms of Lease ☐ Oil ☐ Gas ☐ Natural Gas	☐ Meridian Oil Inc. is Operator ☐ El Paso Production Company
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If change of ownership give name and address of previous owner: El Paso Natural Gas Company, P. O. Box 4284, Farmington, NM 87499

II. DESCRIPTION OF WELL AND LEASE

Lease Name: <u>Canyon Largo Unit</u>	Well No.: <u>21</u>	Pay Stage, including formation: <u>So. Blanco and Cliffs Fm.</u>	Kind of Lease: <u>SP 01940</u>	Lease No.: <u></u>
Location: <u>D</u>	<u>920</u>	<u>North</u>	<u>290</u>	<u>West</u>
Unit Lease: <u>4</u>	Feet From Top: <u>25M</u>	Line and: <u>6W</u>	Feet From Top: <u></u>	<u>Rio Arriba</u>
Line of Section: <u></u>	Formal: <u></u>	Range: <u></u>	Section: <u></u>	County: <u></u>

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorizing Transporter of Oil: <u>Meridian Oil Inc.</u>	Name of Authorizing Transporter of Natural Gas: <u>El Paso Natural Gas Company</u>	Address (Give address to which copies of this form are to be sent): <u>P. O. Box 4239, Farmington, NM 87499</u>
☐ If well produces oil or fluids, give location of tanks.		☐ If this actually comes from a well, give well number.

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

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

IV. 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
Date: 11-1-86
(Date)

OIL CONSERVATION DIVISION
NOV 01 1986

APPROVED BY: [Signature]
TITLE: SUPERVISOR DISTRICT

This form is to be filed in compliance with RULE 1-24.
If this is a request for allowable for a newly drilled or re-completed well, this form must be accompanied by a tabulation of all production tests taken on the well in accordance with RULE 1-24.
All sections of this form must be filled out completely for wells on new and re-completed wells.
Fill out only Sections I, II, IV and V for changes to existing well name or number, or transportation or other such change in production.
Separate Forms O-104 must be filed for each pool in separately completed wells.