

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION
P.O. BOX 2428
SANTA FE, NEW MEXICO 87501

Form O-134
Rev. 01-10-63
Form O-134-1
Page 1

REQUEST FOR ALLOWANCE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NOV 01 1936

Name of Operator Meridian Oil Inc.	
Address P.O. Box 4289, Farmington, NM 87409	
☐ Oil ☐ Natural Gas ☐ Both	☐ Oil ☐ Natural Gas ☐ Both
☐ Meridian Oil Inc. is Operator ☐ El Paso Production Company	

If reason of ownership give name and address of previous owner: El Paso Natural Gas Company, P.O. Box 4100, Farmington, NM 87409

II. DESCRIPTION OF WELL AND LEASE

Well Name Coyote Largo Unit	Well No. 65	Section, Township, Range S. Blanco Pic. Cliffs Sec.	Kind of Lease S. Blanco Pic. Cliffs Sec.	Section No. SF 078295
Location B	1150	North	1500	East
Unit Name 3	250	Range	1500	East
Kind of Section 3	250	Range	1500	East

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil and Gas Meridian Oil Inc.	Address (Give address of which approved copy of this form is to be sent) P.O. Box 4289, Farmington, NM 87409
Name of Authorized Transporter of Gas and/or Oil El Paso Natural Gas Company	Address (Give address of which approved copy of this form is to be sent) P.O. Box 4289, Farmington, NM 87409
☐ Oil ☐ Natural Gas ☐ Both	☐ Oil ☐ Natural Gas ☐ Both

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.

Signature
Drilling Clerk
T. H.
11-1-36
(246)

OIL CONSERVATION DIVISION

NOV 01 1936

APPROVED
BY
TITLE
SUPERVISION DISTRICT 10

This form is to be filed in compliance with rules 10-2.
If this is a request for allowance for a newly drilled or reworked well, this form must be accompanied by a tabulation of the costs for tests taken on the well in accordance with rules 10-1.
All sections of this form must be filled out completely, even if a well is new and reworked well.
Fill out only Sections I, II, III, and VI for changes of operator, well name or number, or transporter or other such change of data.
Separate Forms O-134 must be filed for each pool in multiply completed wells.