STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

. ** *** ***	11440		
DISTRIBUTE	0#		T
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FILE			П
U.S.G.S.			
LANG OFFICE			
TRANSPORTER	016		
	0 44		
OPERATOR			
PROBATION OFFICE			

OIL CONSERVATION DIVISION SANTA FE. NEW MEXICO 87501

Form C-104 Revised 10-01-78 Format 06-01-83 NOV 01 1986

REQUEST FOR ALLOWARIE

OPERATOR /	NO OIL COM SAL	
I.	PORT OIL AND NATURAL GAS DIST. 9	
Meridian Oil Inc.		
Address		
P. O. Box 4289, Farmington, NM 87499		
Reason(s) for filing (Check proper box)	Other (Please explain)	
New Well Change in Transporter et:	Change in Transporter of: Meridian Oil Inc. is Operator	
	for El Paso Production Company	
X Change In College Company Constraint Const	ondensets	
If change of ownership give name El Paso Natural Gas Compa	uny, P. O. Box 4289, Farmington, NM 87499	
II. DESCRIPTION OF WELL AND LEASE		
Canyon Largo Unit Well No. Pool Name, Including Franchist Pictu	ormstice Kind of Lease SF 078882 Lease No.	
Canyon Bargo onic 200 Barrard Freed	State, Federal or Fee	
Location M 890 South	800 West	
	e and Feet From The	
19 25N	6W Rio Arriba	
Line of Section Township Range	, NMPM, County	
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	GAS	
Name of Authorized Transporter of Cit or Congeniate 🛣	Andress (Give address to which approved copy of this form is to be sent)	
Meridian Oil Inc.	P. O. Box 4289, Farmington, NM 87499	
Firebaso, March Late Gas of Subabased Cas at Dia Cas (1)	Addres 6: Box 4289, chaining con, in 187499 of sent	
The Second Trans.	is gas actually connected?	
If well produces oil or liquids, UM Seps 723N Row	The data delicately controlled to the state of the state	
If this production is commingled with that from any other lesse or pool,	The compaging order numbers	
·	Ette committent order udmoer.	
NOTE: Complete Parts IV and V on reverse side if necessary.		
VI. CERTIFICATE OF COMPLIANCE OIL CONSERVATION DIVISION NOV UI 1985		
	1101	
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	APPROVED	
my knowledge and belief.	BY Bich Chang	
	TITLE SUPERVISION DISTRICT # 3	
	This form is to be filed in compliance with RULE 1104.	
(Signature)	If this is a request for allowable for a newly drilled or deepene 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) 11-1-86	All sections of this form must be filled out completely for sliow able on new and recompleted wells.	
(Date)	Fill out only Sections I. II. III, and VI for changes of owner	
	well name or number, or transporter, or other such change of condition Separate Forms C-104 must be filled for each pool in multipli	
· i	completed wells.	