## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT Form C-104 ..................................... Revised 10-01-78 Format 06-01-83 DIST 4 18 UT 104 OIL CONSERVATION DIVISION والم فاووها SANTA PE P. O. BOX 2088 FILE SANTA FE. NEW MEXICO 87501 U.S.G.A. LANG OFFICE NOV 01 1986 -446 REQUEST FOR ALLOWABLE OIL CON. DIV. OPERATOR AND PROBATION OFFICE AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Operated Meridian Oil Inc. P. O. Box 4289, Farmington, NM 87499 Reason(s) for filing (Check proper box) Other (Please explain) New Well Chance in Transporter of: Meridian Oil Inc. is Operator OIL Dry Gas for El Paso Production Company Condensete Change wowwww.Opera.torship Casinghesi Gen If change of ewnership give name El Paso Natural Gas Company, P. O. Box 4289, Farmington, NM 87499 and address of previous owner El Paso Natural Gas Company, P. O. Box 4289, Farmington, NM 87499 II. DESCRIPTION OF WELL AND LEASE SF 078882 Ledse No. Pool Name, including Formation Kind of Lease Ballard Pictured Cliffs 269 Canyon Largo Unit State, Federal or Fee Location 825 West South 1190 Feet From The Line and Unit Letter Feet From The Rio Arriba 6W 20 25N County Range NMPM Line of Section Township III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Aggrees (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Cit Box 4289, Farmington, Meridian Oil Inc. NM 87499 P. O. Box 4289, Farmington, NM 87499 or Dry Gas A Name of Authorized Transporter of Casinghedd Gas [ ] Is das actually connected? s 20 25n If well produces oil or liquids, give location of tanta. 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. OIL CONSERVATION DIVISION VI. CERTIFICATE OF COMPLIANCE NOV 01 1986 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 my knowledge and belief. SUPERVISION DISTRICT # 3 TITLE

(Signature)

(Date)

Drilling Clerk

(Title) 11-1-86

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with AULE 111.

All sections of this form must be filled out completely for sliowable on new and recompleted wells.

Fill out only Sections I. II. III, and VI for changes of owner. ell name or number, or transporter, or other such change of condition.

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