STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

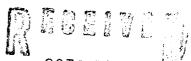
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##. ## CPP:4# 98C			
DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.A.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PROBATION OFFICE			L

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104 Revised 10-01-78 Format 06-01-83 Page 1



TRANSPORTER OIL REQUEST FOR	L 3 L 14X /		
AUTHORIZATION TO TRANSP	ORT OIL AND NATURAL GAS IL CON DIV		
Operator	DIST. 3		
Merrion Oil & Gas Corp.			
Address			
P. O. Box 840, Farmington, New Mexico 874			
Reoson(s) for filing (Check proper box)	Other (Please explain)		
New Well Change in Transporter of:	Gas		
Recompletion	ndensate ·		
Change in Ownership X Casinghead Gas Co			
If change of ownership give name and address of previous owner			
II. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including Fo	ormation Kind of Lease No.		
Lease Maile	State Federal of Fac p 1 1 NMA 0 C 2 C		
Oso Canyon Gas Com C 1 Gavilan Manco			
Unit Letter F : 1650 Feet From The North Line and 1650 Feet From The West			
Line of Section 13 Township 24N Range 2W , NMPM, Rio Arriba County			
Name of Authorized Transporter of Calinghead Gas X or Dry Gas Address (Give address to which approved copy of this form is to be some of Authorized Transporter of Casinghead Gas X or Dry Gas Address (Give address to which approved copy of this form is to be some of Authorized Transporter of Casinghead Gas X or Dry Gas Address (Give address to which approved copy of this form is to be some of Authorized Transporter of Casinghead Gas X or Dry Gas Address (Give address to which approved copy of this form is to be some of Authorized Transporter of Casinghead Gas X or Dry Gas Address (Give address to which approved copy of this form is to be some of Authorized Transporter of Casinghead Gas X or Dry Gas Address (Give address to which approved copy of this form is to be some of Authorized Transporter of Casinghead Gas X or Dry Gas Address (Give address to which approved copy of this form is to be some of Authorized Transporter of Casinghead Gas X or Dry Gas Address (Give address to which approved copy of this form is to be some of Authorized Transporter of Casinghead Gas X or Dry Gas Address (Give address to which approved copy of this form is to be some of Authorized Transporter of Casinghead Gas X or Dry Gas Address (Give address to which approved copy of this form is to be some of Authorized Transporter of Casinghead Gas X or Dry Gas Address (Give address to which approved copy of this form is to be some of Authorized Transporter of Casinghead Gas X or Dry Gas Address (Give address to which approved copy of this form is to be some of Authorized Transporter of Casinghead Gas X or Dry Gas Address (Give address to which approved copy of this form is to be some of Address (Give address to which approved copy of this form is to be some of Address (Give address to which approved copy of this form is to be some of Address (Give address to which approved copy of this form is to be some of Address (Give address to which approved copy of this form is to be some of Address (Give address to which approved copy of this form is			
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. OIL CONSERVATION DIVISION APPROVED STANDARY BY			
my knowledge and benef.	SUPERVISOR DETRICT # 3		
The Merron (Signature)	This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or despendently this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.		
T. Greg Merrion, Production Engineer (Tule)	All sections of this form must be filled out completely for allowable on new and recompleted wells.		
10/29/87 (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 filed for each pool in multiply completed wells.		