

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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U.S.S.	
LAND OFFICE	
TRANSPORTER	OIL
OPERATOR	GAS
PRODUCTION OFFICE	

OIL CONSERVATION DIVISION

P. O. BOX 2038

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form OCS-1
Revised 10-1-78
Printed 10-1-78
Page 1

Operator Meridian Oil Inc.	
Address P. O. Box 4289, Farmington, NM 87499	
Reason(s) for filing (Check proper box)	Other (Please explain)
☐ New Well ☐ Recompletion ☒ Change in Ownership	☐ Change in Transporter of: ☐ Oil ☐ Gas ☐ Condensate ☐ Dry Gas ☐ Casinghead Gas ☐ Condensate
Meridian Oil Inc. is Operator for El Paso Production Company	

If change of ownership give name and address of previous owner: El Paso Natural Gas Company, P. O. Box 4289, Farmington, NM 87499

II. DESCRIPTION OF WELL AND LEASE

Lease name	Well No.	Pool Name including Formation	Kind of Lease	Lease No.
Sheets A	1	Largo Canyon Pic. Cliffs Ext	State, Federal or Fee	SF 080375
Location				
Unit Letter C	809	Feet From The North	Line and 1632	Feet From The West
Line of Section 31	Township 26N	Range 7W	N.M.P.V.	Rio Arriba

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which approved copy of this form is to be sent)
Meridian Oil Inc.	X	P. O. Box 4289, Farmington, NM 87499
Name of Authorized Transporter of Casinghead Gas	or Dry Gas	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Company	X	P. O. Box 4289, Farmington, NM 87499
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	C	31
		26N
		7W

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]
(Signature)
Drilling Clerk
(Title)
11-1-86
(Date)

OIL CONSERVATION DIVISION

NOV 01 1986

APPROVED _____
BY: *[Signature]*
TITLE: SUPERVISION DISTRICT #3

This form is to be filed in compliance with RULE 10.1.
If this is a request for allowable for a newly drilled or recompleted well, this form must be accompanied by a tabulation of the production tests taken on the well in accordance with RULE 11.1.
All sections of this form must be filled out completely for new, allowable or new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change or production.
Separate Forms C-104 must be filed for each pool in which well is completed within.