STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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DISTRIBUTION	Ι.	
SANTA PE	I.	
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER OIL		
G AS		
OPERATOR		
PROBATION OFFICE		

OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

RECEIVED NOV 01 1986

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

OIL CON. DIV.

I. AUTHORIZATION TO	TRANSPORT OIL AND NATURAL GAS DIST. 3	
Meridian Oil Inc.		
P. O. Box 4289, Farmington, NM 87499		
Reason(s) for filing (Check proper box)	Other (Please explain)	
New Well Change in Transporter of:	Change in Transporter of: Meridian Oil Inc. is Operator	
Recompletion OII	for El Paso Production Company	
X Change INVOLVENCEOperatorship Casingheed Gas	Condensate	
If change of ownership give name El Paso Natural Gas and address of previous owner El Paso Natural Gas	Company, P. O. Box 4289, Farmington, NM 87499	
II. DESCRIPTION OF WELL AND LEASE		
	uding Formation Kind of Lease Lease No.	
	Pictured Cliffs State (Federal) or Fee SF 080674	
Location L 1840 See See The South	1115 West	
Unit Letter L : 1840 Feet From The South	Line and 1115 Feet From The West	
Line of Section 21 Township 27N Ray	qe 4W , NMPM, Rio Arriba County	
W. DEGGAMENTON OF THE COMPANY OF THE COMPANY		
III. DESIGNATION OF TRANSPORTER OF OIL AND NA	Address (Give address to which approved copy of this form is to be sent)	
		
Meridian Oil Inc. Name of Authorized Transporter of Casinghead Gas or Dry Gas	P. O. Box 4289, Farmington, NM 87499 Address (Give address to which approved copy of this form is to be sent)	
Northwest Pipeline Corp.		
Unit Sec. Two	P. O. Box 8900, Salt Lake City, UT 84110	
If well produces oil or liquids. Give location of tanks. L 21 27N	4W	
If this production is commingled with that from any other lease o	pool, give commingling order number:	
NOTE: Complete Parts IV and V on reverse side if necessary	·	
VI. CERTIFICATE OF COMPLIANCE OIL CONSERVATION DIVISION		
NOV 01 1906		
I hereby certify that the rules and regulations of the Oil Conservation Division	n have APPROVED 19	
been complied with and that the information given is true and complete to the my knowledge and belief.	BY 3.1)	
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$\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}}}}}$	TITLE SUPERVISION DISTRICT #3	
Land Vale	This form is to be filed in compliance with RULE 1104.	
eggy woah	If this is a request for allowable for a newly drilled or deepened	
(Signature) Drilling Clerk	well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with AULE 111.	
(Tule)	All sections of this form must be filled out completely for allow-	
11-1-86	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 filed for each pool in multiply completed wells.	