STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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DISTRIBUTION			
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LANG OFFICE			
TRANSPORTER	OIL		
	944		
OPERATOR			
PROBATION OFFICE			

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS		
Operator Meridian Oil Inc.		
P. O. Box 4289, Farmington, NM 87499		
Reason(s) for filing (Check proper box)	Other (Picase explain)	
New Well Change in Transporter el:		
	for El Paso Production Company	
	andensate :	
If change of ownership give name El Paso Natural Gas Compa	ny, P. O. Box 4289, Farmington, NM 87499	
II. DESCRIPTION OF WELL AND LEASE		
Lesse Name Weil No. Pool Name, including Fo	<u>-</u>	
Hancock 7 Basin Dakota	State, Federal or Fee NM 03541	
Unit Letter I : 1680 Feet From The South Lin	e and West	
Line of Section 30 Township 28N Range	9W NMPM, San Juan County	
Meridian Oil Inc. Name of Authorized Transporter of Casingness Gas or Dry Gas El Paso Natural Gas Company	P. O. Box 4289, Farmington, NM 87499 P. O. Box 4289, Farmington, NM 87499 Address (Give address to which approved copy of this form is to be sent) P. O. Box 4289, Farmington, NM 87499	
If well produces oil or liquids, que location of tanzs. Unit Sec. Twp. Rgs. I 30 28N 9W	Is gas actually connected?	
If this production is commingled with that from any other lease or pool. NOTE: Complete Parts IV and V on reverse side if necessary.	give commingling order number:	
VI. CERTIFICATE OF COMPLIANCE OIL CONSERVATION DIVISION		
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.	BYSUPERVISION DISTRICT # 0	
Lean & male	This form is to be filed in compliance with MULE 1104. 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) 11-1-86	All sections of this form must be filled out completely for allow 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.	