

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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SANTA FE	
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LAND OFFICE	
TRANSPORTER	☐ OIL
OPERATION	☐ GAS
PRODUCTION OFFICE	

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

Form C-104
Revised 10-01-78
Format 08-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator El Paso Natural Gas Company		
Address P. O. Box 4289, Farmington, NM 87499		
Reason(s) for filing (Check proper box)		Other (Please explain)
☐ New Well	☐ Change in Transporter oil	
☐ Recompletion	☐ Oil ☐ Dry Gas	
☐ Change in Ownership	☐ Coninghead Gas ☒ Condensate	

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Lucerne A	Well No. 3A	Pool Name, including Formation Blanco Mesa Verde	Kind of Lease State, (Federal) or Fee SF 078389	Lease No.
Location				
Unit Letter I	1600 Feet From The South Line and 1050 Feet From The East			
Line of Section 3	Township 31N	Range 10W	San Juan County	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒ Meridian Oil Inc.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1599, Aztec, New Mexico 87410
Name of Authorized Transporter of Coninghead Gas ☐ or Dry Gas ☒ El Paso Natural Gas Company	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, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? when
A 3 31N 10W	

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

RECEIVED
JUN 12 1986
OIL CON. DIV.
DIST. 3

OIL CONSERVATION DIVISION
JUN 11 1986

APPROVED *[Signature]* 19
BY *[Signature]*
SUPERVISOR DISTRICT #3
TITLE

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 RULE 111.

All sections of this form must be filled out completely for allowable on 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 of condition.

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

10/10/2020