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		SEP	-9 1985					
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STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT		1	-C. D. IA, OFFIC			Form C-1	D4	
DISTRIBUTION	DISTRIBUTION OIL CONSERVATION DIVISION							
FILE J	P. O. BOX 2066							
LAND OFFICE	SAI	NTA FE, NEI	N MEXI	CO 87501				
TRANSPORTER OIL COL								
PRORATION OFFICE	AUTHORIZAT	A ION TO TRANS	ND PORT OIL	AND NATL	JRAL GAS			
Operator MERIDIAN OIL INC.	· · · · · · · · · · · · · · · · · · ·			<u></u>	······			
Address								
1800 WILCO BUILDING; Reason(s) for filing (Check proper box)	MIDLAND, TH	EXAS 79701		Other / Plan	e evolan i			
New Well	Change in Tran	Other (Please explain) Meridian Oil Inc. is an agent for						
Recompletion	Un U						for	
XX Change in Commentation Operators			ondensate				·	
Operatorship If change of <u>XXXxxxxi</u> p give name and address of previous owner	to Meridian	loration Co 1.0il Produc	ompany w tion_l	whose nam	ne was chan	ged, as of 4	-10-85,	
I. DESCRIPTION OF WELL AND								
Lease Name		Name, including F		· · · · · · · · · · · · · · · · · · ·	Kind of Lease		Lease No.	
Jurnegan State Com	<u>I</u> Bal	dridge Cany	on (Mo)	row)	State, Federal a	Fee State		
)Feet From The	South Lin	• and	660	Feet From Th	West		
Line of Section 12 Towns	hip 24-S	Range	24-E	, NMPN	۹,	Eddy	County	
III. DESIGNATION OF TRANSPOL		ND NATTRAL	GAS					
Name of Authorized Transporter of Cil	or Condena		Address (Give address	to which approved	copy of this form is	to be sent)	
Name of Authorized Transporter of Casing El Paso Natural Gas Cómp		Dry Gas 🕅		<i>live address</i> Vilco Bui		l copy of this form is land, Texas	so be sens) 79701	
		Twp. Rge.	the second s	ually connect		Talla, Texas	79701	
give location of tanks.	ة ا 	•	yes		! 2	<u>-25-81</u>	st ID-3	
f this production is commingled with t	hat from any othe	r lease or pool,	give comm	ingling order	number:	c	-13-85	
NOTE: Complete Parts IV and V o	n reverse side if	necessary.					Chg op	
7I. CERTIFICATE OF COMPLIANC	E			OIL C	ONSERVATIO		- /	
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			APPRO	VED	SEP 101		, 19	
ny knowledge and belief.			BY		Original Sign			
			TITLE		_ Supervisor Di	strict +1	.*~	
AMES R. PERMENTER (Signaiwe)			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					
ATTORNEY-IN-	•		tests ta	ten on the v	vall in accordan	nce with RULE 11	۱.	
(Tule) APRIL 10, 1985				All sections of this form must be filled out completely for allow- able on new and recompleted wells.				
(Date)			well nan	e or number,	, or transporter,	II, and VI for cha or other such chan e filed for each p	a of condition.	
			complete	d wells.	uual D	- THAN TOL ASCU D	oor in multiply	