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P. O. BOX 2088

REQUEST FOR ALLOWABLE  
AND

Form C-104  
Revised 10-01-78  
Format 06-01-83  
Page 1

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NOV 01 1986

~~ALL CON. DIM.~~  
DIST. 3

<b>Operator</b> Meridian Oil Inc.		DIST. 3,
<b>Address</b> P. O. Box 4289, Farmington, NM 87499		
<b>Reason(s) for filing (Check proper box)</b> <input type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input checked="" type="checkbox"/> Change in Ownership		<b>Other (Please explain)</b> Meridian Oil Inc. is Operator for El Paso Production Company
Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Casinghead Gas		<input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate

## II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
San Juan 27-4 Unit	50E	Basin Dakota	State (Federal) or Fee	SF 080672
Location				
Unit Letter	C	940	Feet From The	North
			Line and	1840
			Feet From The	West
Line of Section	19	Township	27N	Range
			4W	NMPM,
				Rio Arriba
				County

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>					Address (Give address to which approved copy of this form is to be sent)	
Meridian Oil Inc.					P. O. Box 4289, Farmington, NM 87499	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>					Address (Give address to which approved copy of this form is to be sent)	
Northwest Pipeline Corp.					P. O. Box 8900, Salt Lake City, UT 84110	
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	C	19	27N	4W		

**NOTE:** Complete Parts IV and V on reverse side if necessary.

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.

NOV 01 1986

APPROVED \_\_\_\_\_, 19\_\_\_\_

BY John J. O'Connell

**TITLE** SUBMITTAL OF LOT # 3

This form is to be filed in compliance with AULG 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 AULG 111.

All sections of this form must be filled out completely for allowance 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.

Drilling Clerk

(Tulu)

11-1-86

(Date)