STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

DISTRIBUTION			
SANTA PE			
FILE			
V.4.G.4.			
LAND OFFICE			
TRANSPORTER	٥١٢		
	G AS		
OPERATOR			
PRODATION OFFICE			

OLL CONSERVATION DIVISION P. O. BOX 2088

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

SANTA FE, NEW MEXICO 87501

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

REQUEST FOR ALLOWABLE

PRORATION OFFICE	NOV 01 1986	
AUTHORIZATION TO TRANS	SPORT OIL AND NATURAL GAS	
Operator	an con Div	
Meridian Oil Inc.	DIST. 3	
Address		
P. O. Box 4289, Farmington, NM 87499		
Reason(s) for filing (Check proper box)	Other (Please explain)	
New Weti Change in Transporter of:	Meridian Oil Inc. is Operator	
	for El Paso Production Company	
Change in Child Nation Operatorship Casinghead Gas	Condensate	
If change of ownership give name El Dogo Natural Con Comme	one D. O. Boy 4200 Formington NV 07400	
If change of ownership give name El Paso Natural Gas Compand and address of previous owner El Paso Natural Gas Compa	any, P. O. Box 4289, Farmington, NM 87499	
II. DESCRIPTION OF WELL AND LEASE	·	
Lease Name Well No. Pool Name, Including F	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 Lin	ne and Feet From The West	
Line of Section 19 Township 27N Bonce	4W NUBY Rio Arriba Causa	
Line of Section 19 Township 27N Range	4W , NMPM, RIO AITIDA County	
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	LCAS	
Name of Authorized Transporter of Cit or Condensate	Address (Give address to which approved copy of this form is to be sent)	
Meridian Oil Inc.	P 0 Box 4289 Farmington NM 87400	
Name of Authorized Transporter of Casinghead Gas or Dry Gas A	P. O. Box 4289, Farmington, NM 87499 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 all or liquids. Unit Sec. Twp. Rgs.	le gas actually connected? When	
give location of tanes. C 19 27N 4W	1 Newstandaria 1	
If this production is commingled with that from any other lesse or pool,	give commingling order number:	
NOTE: Complete Parts IV and V on reverse side if necessary.		
	04 651455145	
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION	
I hereby certify that the rules and regulations of the Oil Conservation Division have	NOV 01 1986	
been complied with and that the information given is true and complete to the best of	7.11	
my knowledge and belief.	BY	
	TITLE SUPPRESCIONATE NOT#3	
This form is to be filed in compliance with Aug		
If this is a request for allowable for a newly d		
(Signature)	well, this form must be accompanied by a tabulation of the deviation	
Drilling Clerk	tests taken on the well in accordance with AULE 111. All sections of this form must be filled out completely for allow	
(Tille) 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.	
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