STATE OF NEW MEXICO ENERGY MO MINERALS DEPARTMENT

DISTRIBUTION	
SANTA FE	
FILE	
U.4.0.4.	
LANG 0111EE	
TRAMPPORTER OIL	
646	
OPERATOR	
PROBATION OFFICE	

OIL CONSERVATION DIVISION P. 0 80× 2088 SANTA FE. NEW MEXICO 87501

Form C-104 Revised 10-01-78 Formal 06-01-83

TEIVED

OPERATOR AN	NOV 01 1986	
T. AUTHORIZATION TO TRANSP	ORT OIL AND NATURAL GAS OIL CON. DIV	
Operator	DIST. 3	
Meridian Oil Inc.		
P. O. Box 4289, Farmington, NM 87499		
Reason(s) for filing (Check proper box)	Other (Please explain)	
New Volt Change in Transporter of:	Meridian Oil Inc. is Operator for El Paso Production Company	
	ndensete :	
If change of ownership give name El Paso Natural Gas Comparant address of previous owner El Paso Natural Gas Comparant	ny P. O. Roy 4289 Farmington VM 87199	
and address of previous owner	ny, 1. 0. box 4205, ranmington, 0/405	
II. DESCRIPTION OF WELL AND LEASE Lease Name Well No. Pool Name, Including Fo	emetion Kind of Locate Legae No.	
Lindrith Unit 48 So Blanco Pig	State. Federal or Fee	
Location		
Unit Letter 0 : 800 Feet From The South Line	and 1550 Feet From The East	
Line of Section 10 Township 24N Range	3W NMPM, Rio Arriba County	
THE PROPERTY OF STANDARD CASE		
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name at Authorized Transporter of Cit or Condensate & Address (Give address to which approved copy of this form is to be sent)		
Meridian Oil Inc. P. O. Box 4289, Farmington, NM 87499 Address Give address to which approved copy of this form is to be sent;		
Name of Authorized Transparter of Casinghous Gas are or Dry Gas A	P. O. Box 4289. Farmington. NM 87499	
If well produces oil or liquids. Unit Sec. Twp. Rge.	is gas detudity connected? when	
give location of tants. 0 10 24N 3W	The Mark Annual	
If this production is commingled with that from any other lesse or pool,	give comminging order number	
NOTE: Complete Parts IV and V on reverse side if necessary.	1	
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION	
I hereby certify that the rules and regulations of the Oil Conservation Division have	NOV 01, 1986, 19	
been complied with and that the information given is true and complete to the best of my knowledge and belief.	8Y	
	TITLE SUPERVISION DISTRICT # 5	
	This form is to be filed in compliance with RULE 1104.	
Jegger Soak	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	
(Signature) Drilling Clerk	teets taken on the well in accordance with AULE 111.	
(Tule) 11-1-86	All sections of this form must be filled out completely for sllow- 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.	
	Separate Forms C-104 must be filed for each pool in multiply completed wells.	