STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

	C17 E0	
DISTRIBUTION		
SANTA FE .		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PROBATION OFFICE		

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

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

REQUEST FOR ALLOWABLE

AND

PROBATION OFFICE AUTHORIZATION TO TRANSP	COET OIL AND NATURAL GAS		
I.	OIL CON. DIV.		
Operator			
MERIDIAN OIL INC.	DIST. 3		
Address			
1. O. Bon 420), Illustricion, series	Other (Please explain)		
Reason(s) for filing (Check proper box)	Meridian Oil Inc. is an agent for		
New Well Change in Transporter of:	Meridian Oil Production Inc.		
Mecompletion = -	ndensate		
	pany whose name changed, as of 4-10-85,		
If change of NEKHEKEE give name			
and address of previous owner			
II. DESCRIPTION OF WELL AND LEASE			
Veil No. Pool Name, including to	Callum Dokoto I .11C.11/Do		
Jicarilla #126 S #15 W. Lindrith	Gallup Dakota State, Federal or Fee		
Location A 790 North	790 East		
n , , , , , , , , , , , , , , , , , , ,	e and Feet From The		
	R4W Rio Arriba County		
Line of Section Township Range	, NMPM, County		
Name of Authorized Transporter of Cilian or Condensate Permian Corporation Name of Authorized Transporter of Casinghead Gas or Dry Gas Northwest Pipeline Corp. If well produces off or liquids, A 11 24N 4W If this production is commingled with that from any other lease or pool,	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1702, Farmington, N.M. 87499 Address (Give address to which approved copy of this form is to be sent) P.O. Box 90, Farmington, N.M. 87499 Is gas actually connected? When		
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.	OIL CONSERVATION DIVISION SEP 0 9 1985 BY TITLE SUPERVISOR DISTRICT # 3		
JAMES R. PERMENTER (Signature)	This form is to be filed in compliance with RULE 1104. If this is a request for sllowable 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.		
ATTORNEY-IN-FACT (Title)	All sections of this form must be filled out completely for allow able on new and recompleted wells.		
APRIL 10. 1985 (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 flied for each pool in multiply completed wells.		