

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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LAND OFFICE	
TRANSPORTER	OIL
OPERATOR	GAS
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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1
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NOV 01 1986
OIL CON. DIV. J
DIST. 3

I. Operator
Meridian Oil Inc.

Address
P. O. Box 4289, Farmington, NM 87499

Reason(s) for filing (Check proper box)
☐ New Well
☐ Recompletion
☒ Change in Operatorship
 Change in Transporter of:
☐ Oil
☐ Dry Gas
☐ Condensate
☐ Casinghead Gas
 Other (Please explain)
Meridian Oil Inc. is Operator for El Paso Production Company.

If change of ownership give name and address of previous owner El Paso Natural Gas Company, P. O. Box 4289, Farmington, NM 87499

II. DESCRIPTION OF WELL AND LEASE

Lease Name Ticorilla 67 Well No. 1 Pool Name, including Formation So. Placer Pictured Cliffs Kind of Lease Jic Cont. Lease No. 67

Location P 990 South 990 East

Unit Letter 20 Feet From The 25N Line and 5W Feet From The Rio Arriba

Line of Section ✓ Township 25N Range 5W NMPM, County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒
Meridian Oil Inc.
El Paso Natural Gas Company
 Address (Give address to which approved copy of this form is to be sent)
P. O. Box 4289, Farmington, NM 87499

Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒
 Address (Give address to which approved copy of this form is to be sent)
P. O. Box 4289, Farmington, NM 87499

If well produces oil or liquids, give location of tanks. Unit P Sec. 20 Twp. 25N Rge. 5W

Is gas actually connected? ☐ When

If this production is commingled with that from any other lease or pool, give commingling order number: _____

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.

[Signature]
(Signature)
Drilling Clerk
(Title)
11-1-86
(Date)

OIL CONSERVATION DIVISION
NOV 01 1986

APPROVED _____, 19____
BY [Signature]
TITLE SUPERVISION DISTRICT # 3

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 tests taken on the well in accordance with RULE 111.

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