

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

TO: DIRECTOR	
FROM: FIELD OFFICE	
SUBJECT:	
FILE:	
MAILING:	
CHECK OFF:	
DATE:	
BY:	
REMARKS:	

OIL CONSERVATION DIVISION

P.O. BOX 2098
SANTA FE, NEW MEXICO 87501

Form 2100
Revised 1-1-73
Format OK 1-83
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REQUEST FOR ALLOWABLE
AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NOV 01 1985
OIL CONSERVATION DIVISION

Operator Meridian Oil Inc.	
Address P. O. Box 4289, Farmington, NM 87499	
☐ This well ☐ Recently drilled ☒ Change in Ownership	Check in Transporter of: ☐ Oil ☐ Gas ☐ Gas Condensate ☐ Change in Operatorship
Other (Please specify): Meridian Oil Inc. is Operator for El Paso Production Company	

Also check and complete 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 Canyon Largo Unit	Well No. 3	Well Name, including location No. Blanco Pictured cliffs	Kind of well SF 070177-0000-00
Location F 1650 North 1570 West	Section 25N	Range 37	County Rio Arriba

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Transporter of Oil Meridian Oil Inc.	Name of Transporter of Gas 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
Is well producing oil or liquids? give production in bbls/day	Is gas actually transported?	

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

NOTE: Complete Part 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)
Drilling Clerk
(Title)
11-1-86
(Date)

OIL CONSERVATION DIVISION

NOV 01 1985

APPROVED _____
BY _____
TITLE SUPERVISOR DISTRICT _____

This form is to be filed in compliance with RULE 1105.
If this is a request for allowance for a newly drilled or cased 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 allowance on new and completed wells.
Fill out only Sections I, II, III, and IV for changes of owner, well name or number, or transporter, or other such change in condition.
Separate Forms C-101 must be filed for each pool in multiply completed wells.