

STATE OF NEW MEXICO
OIL AND MINERALS DEPARTMENT

NO. OF THIS FORM	
DATE OF FILING	
CITY	
COUNTY	
LAND OFFICE	
TRAILER OR RAIL	
OPERATOR	
PRODUCTION OFFICE	

OIL CONSERVATION DIVISION
P. O. BOX 1088
SANTA FE, NEW MEXICO 87501

Form O-104
Revised 10-1-78
Form O-104-1
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NOV 9 1986
OIL CONSERVATION DIVISION

Operator
Meridian Oil Inc.

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

Notes (a) To (filing) (check proper box)

☐ New well	☐ Check to Transporter at:	☐ Dry Gas
☐ Re-work well	☐ Oil	☐ Gas
☒ Change well Operatorship	☐ Re-worked well	☐ Gas

Other (Please explain)
Meridian Oil Inc. is Operator for El Paso Production Company

Production of ownership and lease
The address of previous owner El Paso Natural Gas Company, P. O. Box 4289, Farmington, NM 87499

II. DESCRIPTION OF WELL AND LEASE

Well Name <u>Canyon Largo Unit</u>	Well No. <u>129</u>	Port Name, including Formation <u>Castro Chacra</u>	Kind of Lease <u>Surface Fee/Lease for P.O.</u>	Lease No. <u>SF 078380</u>
Location Unit Letter <u>A</u> <u>1100</u> Feet From Top <u>North</u> Line and <u>800</u> Feet From the <u>East</u>	Line of Section <u>4</u> Township <u>25N</u> Range <u>10W</u> North Rio Arriba County			

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <u>Meridian Oil Inc.</u>	Address of Authorized Transporter of Oil <u>P. O. Box 4289, Farmington, NM 87499</u>
Name of Authorized Transporter of Gas and/or Dry Gas <u>El Paso Natural Gas Company</u>	Address of Authorized Transporter of Gas and/or Dry Gas <u>P. O. Box 4289, Farmington, NM 87499</u>
How is production of oil or natural gas location of lease?	Unit S. T. R.
<u>A</u> <u>4</u> <u>25N</u> <u>6W</u>	

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)
Drilling Clerk
(Title)
11-1-86
(Date)

OIL CONSERVATION DIVISION

NOV 9 1986

RECEIVED

BY [Signature]

TITLE SUPPLEMENTAL DISPOSITION

This form is to be filed in compliance with RULE 10.

If this is a request for allowable for a newly drilled or completed well, this form must be accompanied by a calculation of the production taken on the well in accordance with RULE 11.

All parts of this form must be filled out completely for flow rate or new and recompleting wells.

Fill out only Sections I, II, III, and VI for change of owner, well name or number, or transporter or other such change of condition.

Separate Forms O-10 must be filed for each pool in multiple completed wells.