STATE OF NEW MEXICO ATMENT

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OIL CONSERVATION DIVISION

P. O. BOX 2088

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

LANG OFFICE	W MEXICO 87501
PROMATION OFFICE AUTHORIZATION TO TRANS	OR ALLOWABLE AND SPORT OIL AND NATURAL GAS NOV 0 1 1986
Meridian Oil Inc.	OIL CON. DIV.
P. O. Box 4289, Farmington, NM 87499	DIST, 3
Reason(s) for filing (Check proper box) New Wett Change in Transporter of: Recompletion	Meridian Oil Inc. is Operator for El Paso Production Company
If change of ownership give name El Paso Natural Gas Comp	any, P. O. Box 4289, Farmington, NM 87499
II. DESCRIPTION OF WELL AND LEASE Lease Name Canyon Largo Unit 254 Basin Dakota	Formation Kind of Lease SF 078884 ^{Lease No.}
Location A 1150 North Unit Letter Feet From The	850 East
13 25N Line of Section Fange	6W Rio Arriba
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURA Name of Authorized Transporter of Ci or Condensate Meridian Oil Inc. Name of Authorized Transporter of Casingneda Gas or Dry Gas El Paso Natural Gas Company If well produces oil or liquids, Only Gas Owner of the condensate Only Gas Owner of the condensate Only Gas Owner of the condensate Only Gas	P. O. Box 4289, Farmington NM 87499 Address (Give address to which approved copy of this form is to be sent) P. O. Box 4289, Farmington, NM 87499 Address (Give address to which approved copy of this form is to be sent) P. O. Box 4289, Farmington, NM 87499 Is gas actually connected?, when
If this production is commingled with that from any other lease or pool, NOTE: Complete Parts IV and V on reverse side if necessary. VI. CERTIFICATE OF COMPLIANCE	CIL CONSERVATION DIVISION
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.	NOV 01 1986
(Signature) Drilling Clerk (Tule)	TITLE SUPERVISION DISTRICT # 3 This form is to be filed in compliance with MULE 1104. If this is a request for silowable 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 MULE 111. All sections of this form must be filled out completely for silowards.

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.