

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OPERATOR	
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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
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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OIL CON. DIV.
DIST. 3

I. Operator
MERIDIAN OIL INC. *14538*

Address
P. O. BOX 4289; FARMINGTON, NEW MEXICO 87499

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

If change of ~~operatorship~~ *operatorship* El Paso Exploration Company whose name changed, as of 4-10-85, and address of previous owner to Meridian Oil Production Inc.

II. DESCRIPTION OF WELL AND LEASE

Lease Name Jicarilla #126 S <i>7175</i>	Well No. #17	Pool Name, including Formation S. Blanco Pictured Cliffs	Kind of Lease Federal	Lease No. Jic. 126S
Location Unit Letter <i>K</i> <i>1520</i> Feet From The <i>South</i> Line and <i>1850</i> Feet From The <i>West</i> Line of Section <i>1</i> Township <i>T24N</i> Range <i>R4W</i> , NMPM, <i>Rio Arriba</i> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> El Paso Natural Gas Co.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 4289, Farmington, N.M. 87499
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> El Paso Natural Gas Co.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 4289, Farmington, N.M. 87499
If well produces oil or liquids, give location of tanks. Unit <i>K</i> Sec. <i>1</i> Twp. <i>24N</i> Rge. <i>4W</i>	Is gas actually connected? <i>When</i>

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.

James R. Permenter
JAMES R. PERMENTER (Signature)

ATTORNEY-IN-FACT
(Title)

APRIL 10, 1985
(Date)

OIL CONSERVATION DIVISION

APPROVED *DEC 06 1985*, 19 _____
BY *Frank J. [Signature]*
TITLE *SUPERVISOR DISTRICT III*

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.