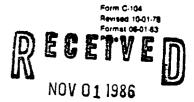
STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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OPERATOR			
PROBATION OFFICE			

OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501



REQUEST FOR ALLOWABLE

I account account !	PORT OIL AND NATURAL GAS DIST. 3	
Operator Meridian Oil Inc.		
P. O. Box 4289, Farmington, NM 87499		
Resear(s) for filing (Check proper box)	Other (Please explain)	
New Well Change in Transporter of:	Meridian Oil Inc. is Operator	
	for El Paso Production Company	
Change w/ChiminentOperatorship Casinghood Gas C	ondensate -	
f change of ownership give name El Paso Natural Gas Compa	any, P. O. Box 4289, Farmington, NM 87499	
II. DESCRIPTION OF WELL AND LEASE		
Locae Name Well No. Poet Name, including F	ormation Kind of Lease No.	
Lindrith Unit 116 So. Blanco Pie	ctured Cliffs Stote Federal of Fee SF 078914	
Location		
Unit Letter F : 1835 Feet From The North Lin	ne and 1465 Feet From The West	
Line of Section 26 Township 24N Range	3W NMPM, Rio Arriba County	
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL Name of Authorized Transporter of Cit or Condensate Condens	P. O. Box 4289, Farmington, NM 87499 Address (Give address to which approved copy of this form is to be sent)	
Name of Authorizes Transporter of Casinghees Gas or Dry Gas A	Address (Give address to which approved copy of this form is to be sent)	
El Paso Natural Gas Company	P. O. Box 4289, Farmington, NM 87499	
If well produces oil or liquids. Give location of tanks. Unit Sec. Twp. Rqc. F 26 24N 3W	Is gas actually connected?	
If this production is commingled with that from any other lesse or pool,	give comminging order numbers	
NOTE: Complete Parts IV and V on reverse side if necessary.		
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION NOV 0 1 1986	
I hereby certify that the rules and regulations of the Oil Conservation Division have	APPROVED	
been complied with and that the information given is true and complete to the best of my knowledge and belief.	84	
	TITLE SUPERVISION DISTRICT # 3	
C Van X)	This form is to be filed in compliance with RULE 1104.	
Signature)	If this is a request for allowable for a newly drilled or deepene well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with AULE 111.	
Drilling Clerk (Tule)	All sections of this form must be filled out completely for silow able on new and recompleted wells.	
11-1-86	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.	