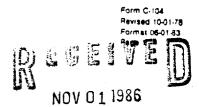
STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION P. O. BOX 2088

SANTA FE, NEW MEXICO 87501



REQUEST FOR ALLOWABLE

OIL CON. DIV. AND

I	DIST. 3		
Meridian Oil Inc.			
P. O. Box 4289, Farmington, NM 87499			
Rooson(s) for filing (Cheek proper box) Other (Please explain)			
New Weti Change in Transporter of:	Meridian off inc. is operator		
	for El Paso Production Company		
X Change in Children Operatorship Casinghood Gas Co	andens et e		
If change of ewnership give name El Paso Natural Gas Compa	iny, P. O. Box 4289, Farmington, NM 87499		
II. DESCRIPTION OF WELL AND LEASE			
Harvey State Well No. Pool Name, Including F. Ballard Pictu	red Cliffs State, Federal or Fee Kind of Lease No. E-2877 Lease No.		
Location M 800 South	915 West		
Unit Letter;Feet From TheLin	e andFeet From The		
16 25N	7W Rio Arriba		
Line of Section Township Range	, NMPM, County		
Meridian Oil Inc. ET Passingta Gas Company Gas of Ory Gas A If well produces oil or liquids. Gas Company Gas Gas Gas Gas Gas Gas Gas Gas Gas A If well produces oil or liquids. Gas	P. O. Box 4289, Farmington, NM 87499 Address G. Box 4289, Farmington, NM 87499 of sens. Is gas actually connected?		
If this production is commingled with that from any other lesse or pool,	give commingling order number		
NOTE: Complete Parts IV and V on reverse side if necessary.			
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION RIVISION 86		
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.	By Buil Cham		
my knowledge and benefit	SUPERVISION DISTRICT # 3		
	TITLE SUPERVISION DISTRICT # 5		
$\mathcal{Y} = \mathcal{Y} + \mathcal{Y} + \mathcal{Y}$	This form is to be filed in compliance with RULE 1104.		
	If this is a request for allowable for a newly drilled or deepened		
(Signature) Drilling Clerk	well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with AULE 111.		
(Title)	All sections of this form must be filled out completely for allow-		
11-1-86	shie on new and recompleted wells. Fill out only Sections I. II. III, and VI for changes of owner.		
(Date)	weil 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.		