STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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OPERATOR.			
PRODATION OFFICE			

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

Form C-104
Revised 10-01-78
Formel 08-01-83

REQUEST FOR ALLOWABLE AND

CIL CON. DIV.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS DIST. 3		
Meridian Oil Inc.		
Address		
P. O. Box 4289, Farmington, NM 87499 Ressen(s) for filing (Check proper box)		
New Weti Change in Transporter et: Recompletion Dit D	Meridian Oil Inc. is Operator for El Paso Production Company	
	endensere	
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 Tapacito	i)C	
Jicarilla 117E weil No. Pool Name, including F Blanco Mesa	Less No.	
Location		
Unit Letter H 1619 Feet From The North	e and 974 Feet From The East	
Line of Section 33 Township 26N Range	3W NMPM, Rio Arriba County	
Meridian Oil Inc. Name of Authorized Transporter of Casinghead Gas ar Dry Gas Northwest Pipeline Co. If well produces oil or liquids, give location of lanss. H 33 26N 3W	P. O. Box 4289. Farmington NM 87499 Address (Give address to which approved copy of this form is to be sent) P. O. Box 8900, Salt Lake City, UT 84110	
If this production is commingled with that from any other lease or pool.	zive 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	OIL CONSERVATION DIVISION FEB 27, 1987	
been complied with and that the information given is true and complete to the best of my knowledge and belief.	Srank Lave	
· · · · · · · · · · · · · · · · · · ·	TITLE SUPERVISOR OISTRICT # 3	
	This form is to be filed in compliance with RULE 1104.	
Signature) Drilling Clerk	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 AULE 111.	
(Title) 11-1-86	All sections of this form must be filled out completely for silowable on new and recompleted wells.	
(Pae)	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.	