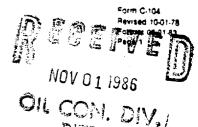
## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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TRANSPORTER	016		
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OPERATOR			
PROBATION OFFICE			

## OIL CONSERVATION DIVISION P. O. 80 X 2088 SANTA FE, NEW MEXICO 87501



REQUEST FOR ALLOWABLE

AND

AUTHORIZATION TO TRANSPORT DIL AND NATURAL GAS

I		
Meridian Oil Inc.		
Address		
P. O. Box 4289, Farmington, NM 87499		
on(s) for filing (Check proper box)  Other (Please explain)		
New Woll Change in Transporter of:	Change in Transporter et: Meridian Oil Inc. is Operator	
	for El Paso Production Company	
X Change in Children Wild peratorship Casinghood Gas Co	andens et e	
If change of ownership give name D. Dana Manual Can Compa	B O Box 4300 Formington NW 97400	
If change of ownership give name El Paso Natural Gas Compa	ny, P. U. Box 4289, Farmington, NM 87499	
II. DESCRIPTION OF WELL AND LEASE Cher	•	
Lesse Name Well No. Pool Name, including Fo		
Vaughn 4 U <del>ndesignat</del> ed	Chacra State, (Federal) or Fee SF 079266	
Location	2000 East	
Unit Letter : 1306 Feet From The Line	e and Feet From The	
20 26N	6W Rio Arriba	
Line of Section 29 Township 2011 Range	NMPM, RIS IIII BQ County	
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	C18	
Name of Authorized Transporter of Cit or Condensate	Addiess (Give address to which approved copy of this form is to be sent)	
Meridian Oil Inc.	P. O. Box 4289, Farmington, NM 87499	
Name of Authorized Transporter of Casinghedd Gas or Dry Gas iX	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. O 29 26N 6W	is gas actually connected? When	
give location of tants.		
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.		
	OIL CONCEDIVATION ON VICION	
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION	
I hereby certify that the rules and regulations of the Oil Conservation Division have	APPROVED NOV 01 1986 19	
been complied with and that the information given is true and complete to the best of	1000	
my knowledge and belief.	but) Chang	
	TITLE	
SUPERVISION DISTRICT # This form is to be filed in compliance with Rule		
(1991) Joak	If this is a request for allowable for a newly drilled or despense	
(Signature)	well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with AULE 111.	
Drilling Clerk	All sections of this form must be filled out completely for silow-	
(Tule) 11-1-86	able on new and recompleted wells.	
(Date)	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	
· <b> </b>	completed wells.	