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Form C-104
Revised 10-01-78
Format 06-01-83
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If change of ownership give name and address of previous owner El Paso Natural Gas Company, P. O. Box 4289, Farmington, NM 87499

Lease Name Canyon Largo Unit	Well No. 199	Pool Name, including Formation Ballard Pictured Cliffs	Kind of Lease State, Federal & Fee	Lease No. SF 078987
Location Unit Letter <u>G</u> : <u>1500</u> Feet From The <u>North</u> Line and <u>1840</u> Feet From The <u>East</u> Line of Section <u>35</u> Township <u>25N</u> Range <u>7W</u> , NMPM, <u>Rio Arriba</u> County				

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>					Address (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 Gaseous Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>					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.	Rge.	Is gas actually connected?	When
	G	35	25N	7W		

NOTE: Complete Parts IV and V on reverse side if necessary.

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.

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

(Date)