

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES SUBMITTED	
DISTRICT	
COUNTY	
FILE	
DATE	
LAND OFFICE	
TRANSPORTER	Oil
OPERATOR	Gas
PRODUCTION OFFICE	

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

Form C-104
Revised 10-01-78
Formal 08-01-83
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REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I, Operator
El Paso Natural Gas Company
Address
P. O. Box 4289, Farmington, NM 87499

Reason(s) for filing (Check one)		Other (Please explain)
☐ New Well	☐ Change in Transporter of:	
☐ Recombination	☐ Oil	☐ Dry Gas
☐ Change in Ownership	☐ Condensate Gas	☒ Condensate

If change of ownership give name and address of previous owner: _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>San Juan 28-6 Unit</u>	Well No. <u>183</u>	Pool Name, including Formation <u>Basin Dakota</u>	Kind of Lease <u>State (Federal) or Fee</u>	Lease No. <u>SF 079363</u>
Location				
Unit Letter <u>G</u>	<u>1840</u> Feet From The <u>North</u> Line and <u>1565</u> Feet From The <u>East</u>			
Line of Section <u>13</u>	Township <u>27N</u>	Range <u>6W</u>	NMPM, <u>Rio Arriba</u> County	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒	Address (Give address to which approved copy of this form is to be sent)	
<u>Meridian Oil Inc.</u>	<u>P. O. Box 1599, Aztec, New Mexico 87410</u>	
Name of Authorized Transporter of Condensate Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)	
<u>El Paso Natural Gas Company</u>	<u>P. O. Box 4289, Farmington, NM 87499</u>	
If well produces oil or liquids, give location of tanks.	Unit <u>G</u>	Sec. <u>13</u>
	Top. <u>27N</u>	Range <u>6W</u>
Is gas actually connected? <u>When</u>		

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.

VI. CERTIFICATE OF COMPLIANCE

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.

Peggy Oak
(Signature)
Drilling Clerk
(Title)
5-1-86
(Date)

RECEIVED
JUN 11 1986
OIL CON. DIV.
DIST. 2

OIL CONSERVATION DIVISION

APPROVED JUN 11 1986
BY [Signature]
TITLE SUPERVISOR DISTRICT 3

This form is to be filed in compliance with RULE 1104.

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 RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

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.