STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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FILE			
U 4.0.4,			
LAND OFFE. E			
TRANSPORTER	DIL		
	UAB		
OPERATOR			
PHORATICHOPP	HC K		

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

Form C-104 Revised 10 01-78 Format 05 01 83 Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

f.			
Uperator			
Merrion Oil & Gas Corporation			
P. O. Box 840 , Farmington, New Mexico 87499)	MFARRIE	
Herson(s) for liling (Cheek proper box)	Other (Please	explains	
New Well Change in Transporter of:			
Recompletion Oil Dr	y Gas	MAY 2 1 1985	len cal
Channe In Cenerality Costinghed Gos Co	ondensate	\(\cdot\)	
If change of ownership give name		DIST. 3	
and address of previous owner			
II. DESCRIPTION OF WELL AND LEASE	•		_
Elease Name Well No. Pool Name, Including Fo	peniation	Kind of Lease	Lease No.
Blackrock D 1-E Basin Dakota		State, Federal or Fee Federal	SF 078899
Location			
Unit Latter 790 Feet From The South Lin	• nnd	Feet From TheWest	
Line of Section 20 Township 26N Stange	11W , NMPM	San Juan	County
A CONTRACTOR OF THE PARTY OF TH			
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	. GAS		
Name of Authorized Transporter of Oil (1) or Condensate	Address (Give address t	to which approved copy of this form is	to be sent;
The Mancos Corporation	P. O. Box 1320	Farmington, New Mexico	87499
Name of Authorized Transporter of Castnghead Gas or Dry Gas	Address (Give address t	to which approved copy of this form is	to be sent)
El Paso Natural Gas Co.	P. O. Box 4289	, Farmington, New Mexico	87499
If well produces oil or liquids, Unit Sec. Twp. Rgs.	Is que actually connecte	•	
cive location of tanks. N , 20 , 26N , 11W	Yes	2/80	
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.	12		
VI. CERTIFICATE OF COMPLIANCE	OIL C	Onservation division	يسد و
	•	MAY 9 1 100E	
I hereby certify that the tules and tegulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of	APPROVED	1363	, 19
my knowledge and belief.	BY	Trank ()	· ·
,		- Saway	
	TITLE	SUPERVISOR DISTRICT	<u> </u>
1 1	This form is to	be filed in compliance with MUL	E 1104.
7m/		seat for allowable for a newly drill	
(Signature)		t be accompanied by a tabulation of wall in accordance with MULE 11	
Story S. Punn, Operations Kanager		this form must be filled out compl	
(Title)	able on new and rec		2, 1, 10, 210,
(Date)		sections I, II, III, and VI for the cher, or transporter, or other such change	
		C-104 must be filed for each p	eci in multiply
	completed wells.		•.