## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

	Γ.		
DISTRIBUTION			$\Gamma_{-}$
SANTA PE		Т	
FILE			
U.1.0.4.			
LAMO OFFICE		$\Pi$	
TRANSPORTER	016		
	948		
OPERATOR			
PROBATION OFFICE			

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

Form C-104 Revised 10-01-78 Format 06-01-83 Page 1

946		REQUEST FO	R ALLOW	ABLE			
PROBATION OFFICE			ND		•		
Ť	AUTHO	RIZATION TO TRANS	PORT OIL	L AND NATU	RAL GAS		
Operator							
Meridian Oil Inc.							
Address						<del></del>	<del></del> -
P. O. Box 4289, Farming	ton. NM	87499					
Reason(s) for filing (Check proper box)				104			
New Well	C)	in Transporter of:	Other (Please explain)				
			Meridian Oil Inc. is Operator				
Recompletion	ᅠ, 님ᅄ	<b></b>	ry Gas	for El	Paso Production	n Company	
X Change INCOMMENSIOPERATORS	UID Cee	Inghees Ges C	ondensate :	<u></u>			
If change of ownership give name	D W			0 5 4	200 5	VII. 07.400	
If change of ownership give name <u>E1</u>	Paso Na	atural Gas Compa	iny, P.	0. Box 4	289, Farmington	1, NM 8/499	
	TE ACE			-			
II. DESCRIPTION OF WELL AND	LEASE Well No	. Pool Name, including F	ormation	<del></del>	Kind of Lease		Lease No.
San Juan 28-5 Unit	42	Blanco Mesa			State, Federal or Fee	SF 079523	
Location	-1-72	Didico Nesa	VCLGC			SF 0/3323	LA
		South .		1650		West	
Unit Letter : 1000	Feet Fr	om The South Lin	ne and	1030	Feet From The	West	<del></del>
Line of Service 31 Towns		28N Range	5W		, Rio Ari	riha	<b>a</b>
Line of Section 31 Towns	INIP	ZOIN Range	- 311	, NMPM	KIO ALI	. IDa	County
THE DESIGNATION OF TRANSPO	nach Or	OF AND MARKEDA					
III. DESIGNATION OF TRANSPO	KIER OF	Condensate (X)	Aggress (	Give address i	o which approved copy of	f this form is to be	sent)
			1				-
Meridian Oil Inc.  Name of Authorized Transporter of Casim	-5	or Dry Gas (X)	1 P. U.	Box 4289	Farmington No which approved copy of	M 87499	
	tueda Gas [		l.				
Northwest Pipeline Corp.					00, Salt Lake (	11ty, UT 84.	110
If well produces oil or liquids.	Jait , Se	•	Is gas actually connected? When				
give location of tanks.		31 <u> </u>	<u>!</u>		<del> </del>	<sup>त्रीक्ष</sup> ण्यात्रम्	
If this production is commingled with	that from a	ny other lease or pool,	give comm	ningling order	number:		
NOTE: Complete Parts IV and V	\ <i>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</i>	cide if necessary					
1401L. Complete 1 unit 17 unit 7	,,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	side if necessary.	D				
VI. CERTIFICATE OF COMPLIANO	CE		OIL CONSERVATION DIVISION				
			NOV - 1 1986				
I hereby certify that the rules and regulations been complied with and that the information [	of the Oil C	Conservation Division have	APPRO	OVED			
my knowledge and belief.	given is true a	ing complete to the best of	av		マル)		
,					4	<del></del>	
			TITLE		SUPERVISION	DISTRICT #	<del>/ 7</del>
					be filed in compliance	- "	
March bak			i)		est for allowable for		
Signatur	•/				be accompanied by a		
	ng Clerk	ζ			well in accordance wi		
(Tule)		·			this form must be fille	ed out completely	for allow
11-1-	-86		18 -		completed wells.	1 177 (as shares	al aware
1 Tromate	(a) (b)	1 10 10	well no	we of unmper	ections I, II. III, and, or transporter or other	r such change of	condition
רַעַן יי	1661	IVEM !			C-104 must be filed		
<i>U\</i> }		' ' <b>5</b>		ed weils.		-	
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14	UV -1 1	400					

OIL CON. DIV.