

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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U.S.A.	
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
Format 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 proper box)
☐ New Well ☐ Change in Transporter of: ☐ Oil ☐ Dry Gas
☐ Recompletion ☐ Condensate Gas ☒ Condensate
☐ Change in Ownership Other (Please explain)

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name San Juan 28-6 Unit	Well No. 55	Pool Name, including Formation Blanco Mesa Verde	Kind of Lease State, Federal or Fee	Lease No. NM 05493
Location Unit Letter M : 850 Feet From The South Line and 850 Feet From The West Line of Section 9 Township 28N Range 6W, N.M.P.M., Rio Arriba County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒ Meridian Oil Inc.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1599, Aztec, New Mexico 87410
Name of Authorized Transporter of Condensate Gas ☐ or Dry Gas ☒ El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 4289, Farmington, NM 87499
If well produces oil or liquids, give location of tanks. Unit M Sec. 9 Twp. 28N Rge. 6W	Is gas actually connected? When

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.

Leann Oak
(Signature)
Drilling Clerk
(Title)
5-1-86

OIL CONSERVATION DIVISION
JUN 11 1986

APPROVED
BY Frank J. Dwyer
TITLE SUPERVISOR DISTRICT #

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.