## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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OPERATOR.				
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## 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

## REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS.

I. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
Meridian Oil Inc.			
P. O. Box 4289, Farmington, NM 87499			
	Meridian Oil Inc. is Operator for El Paso Production Company Condensete		
If change of ownership give name El Paso Natural Gas Compa	any, P. O. Box 4289, Farmington, NM 87499		
II. DESCRIPTION OF WELL AND LEASE   Well No.   Pool Name, including F   Rowley B   1   Fulcher Kutz	Formation Kind of Lease Lease No. Pictured Cliffs State, (Federal) or Fee SF 077386A		
Unit Letter C : 990 Feet From The North Lin	ne and 1650 Feet From The West		
Line of Section 21 Township 27N Range	10W , NMPM, San Juan County		
Name of Authorized Transporter of Casinghead Gas or Dry Gas A El Paso Natural Gas Company  If well produces oil or liquids.  give location of tanks.  C 21 27N 10W	P. O. Box 4289. Farmington. NM 87499  Address (Give address to which approved copy of this form is to be sent)  P. O. Box 4289, Farmington, NM 87499  16 qua actually connected? When		
If this production is commingled with that from any other lesse or pool.			
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.	OIL CONSERVATION DIVISION  NOV 01 1986  BY SUPERVISION DISTRICT # 3		
Signature)  Drilling Clerk  (Fiele)	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 allow-		
11-1-86 (Base)	able 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.		

OK THE STATE