STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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SANTA FE		
FILE		
U.S.G.A.		
LANG OFFICE		
TRANSPORTER OIL		
BAB		
OPERATOR		
PROBATION OFFICE		

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

<u>I</u>	PORT OIL AND NATURAL GAS
Meridian Oil Inc.	
P. O. Box 4289, Farmington, NM 87499	
	Other (Please explain) Meridian Oil Inc. is Operator for El Paso Production Company ondensete
If change of ownership give name El Paso Natural Gas Compaend address of previous owner El Paso Natural Gas Compaend	iny, P. O. Box 4289, Farmington, NM 87499
A 990 North	Pictured Cliffstore, Fodorel of Foo SF 077875
Unit Letter : Feet From The Lin	10W NMPM, San Juan County
Name of Authorized Transporter of Cit or Condensate X Meridian Oil Inc. Name of Authorized Transporter of Casinghedd Gas or Dry Gas X Southern Union Gathering Co. If well produces oil or liquids. give location of tanze. A 8 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 1899, Bloomfield, NM 87413 Is gas actually connected?
If this production is commingled with that from any other lease or pool. NOTE: Complete Parts IV and V on reverse side if necessary.	11
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 APPROVED NOV U1 1500 19
(Signature) Drilling Clerk (Tule) 11-1-86	TITLE SUPERVISION 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.