STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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| FILE | | |
| U.1.G.4. | | |
| LAND OFFICE | | |
| TRANSPORTER | OIL | |
| | 944 | |
| 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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

| AUTHORIZATION TO TRANS | PORT OIL AND NATURAL GAS | |
|--|--|--|
| <u>ī </u> | | |
| Meridian Oil Inc. | | |
| | | |
| P. O. Box 4289, Farmington, NM 87499 | | |
| Reeson(s) for filing (Check proper box) | box) Other (Please explain) | |
| New Wolf Change in Transporter of: | Meridian Oil Inc. is Operator | |
| | for El Paso Production Company | |
| X Change In Change In Change In Cast | ondensete | |
| If change of awarrahin give name | D 0 D 4000 D 1 | |
| If change of ownership give name El Paso Natural Gas Compa | iny, P. U. Box 4289, Farmington, NM 87499 | |
| T DECOMPOSE OF WELL AND LEASE | | |
| II. DESCRIPTION OF WELL AND LEASE [Well No. Pool Name, including F | ormation Kind of Lease No. | |
| | ctured Cliffs State, Federal or Fee NM 013861 | |
| Location | | |
| A 1070 North | 1030 East | |
| | 8W San Juan | |
| 28 28N Line of Section Township Range | ow San Juan County | |
| Meridian Oil Inc. Name of Authorized Transporter of Casinghed Gas or Dry Gas X El Paso Natural Gas Company If well produces oil or liquids. A 28 28N 8W give location of tanks. | 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 Is gas actually connected? Ahen | |
| If this production is commingled with that from any other lesse or pool, | give commingting order number: | |
| NOTE: Complete Parts IV and V on reverse side if necessary. | | |
| VI. CERTIFICATE OF COMPLIANCE | OIL CONSERVATION DIVISION | |
| I hereby certify that the rules and regulations of the Oil Conservation Division have | APPROVED MINV - 1 (150) | |
| been complied with and that the information given is true and complete to the best of | | |
| my knowledge and belief. | BY | |
| | TITLE | |
| | SUPERVISION DISTRICT # | |
| Frank Jak | This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or despendent | |
| (Signature) | well, this form must be accompanied by a tabulation of the deviation | |
| Drilling Clerk | teets taken on the well in accordance with AULE 111. | |
| (Tule) | All sections of this form must be filled out completely for allowable on new and recompleted wells. | |
| 11-1-86 | Fill out only Sections I. II. III. and VI for changes of owner, | |
| (Date) | 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. | |