

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

Form C-104
Revised 10-01-78
Format 08-01-83
Page 1

RECEIVED
JUL 18 1986
OIL CON. DIV.
DIST. 3

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 84799

Reasons for filing (Check proper box)

☐ New Well

☐ Recompletion

☐ Change in Ownership

Change in Transporter of:

☐ Oil

☐ casinghead Gas

☐ Dry Gas

☐ Condensate

Other (Please explain)

Well reconnected after compressor installed 5-20-86.

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease name	Well No.	Pool Name, including Formation	Kind of Lease	Lease
Hardie D	1A	So. Blanco Pictured Cliffs	State (Federal) or Fee	SF 078390A
Location				
Unit Letter	0	1120 Feet From The	South	Line and 1750 Feet From The East
Line of Section	12	Township	28N	Range 8W, NMPM, San Juan

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒	Address (Give address to which approved copy of this form is to be sent)
Meridian Oil Inc.	P. O. Box 1599, Aztec, NM 87410
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Company	P. O. Box 4289, Farmington, NM 84799
If well produces oil or liquids, give location of tanks.	Unit, Sec., Twp., Rng.
	0, 12, 28N, 8W
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.

Peggy Drake

(Signature)

Drilling Clerk

(Title)

7-18-86

(Date)

OIL CONSERVATION DIVISION

APPROVED

JUL 18 1986

BY

Frank J. [Signature]

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 deep well, this form must be accompanied by a tabulation of the dev tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for use on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of a well name or number, or transporter, or other such change of conditions.

Separate Forms C-104 must be filed for each pool in multiple completed wells.

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ENERGY AND MINERALS DEPARTMENT

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P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

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REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

JUL 18 1986
OIL CON. DIV.
DIST. 3

I.

Operator El Paso Natural Gas Company	
Address P. O. Box 4289, Farmington, NM 84799	
Reason(s) for filing (Check proper box)	Other (Please explain)
☐ New Well	Well reconnected after compressor installed 5-20-86.
☐ Recompletion	
☐ Change in Ownership	
Change in Transporter oil:	
☐ Oil	☐ Dry Gas
☐ Casinghead Gas	☐ Condensate

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Hardie D	Well No. 1A	Pool Name, including Formation Blanco Mesa Verde	Kind of Lease State (Federal) Fee SF 078390A
Location			
Unit Letter 0	1120	Feet From The South Line and 1750	Feet From The East
Line of Section 12	Township 28N	Range 8W	N.M.P.M. San Juan C

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒	Address (Give address to which approved copy of this form is to be sent)
Meridian Oil Inc.	P. O. Box 1599, Aztec, NM 87410
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Company	P. O. Box 4289, Farmington, NM 84799
If well produces oil or liquids, give location of tanks.	Is gas actually connected? when
Unit : 0 Sec. : 12 Twp. : 28N Rge. : 8W	

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.

Peggy Doak
(Signature)
Drilling Clerk
(Title)
7-18-86
(Date)

OIL CONSERVATION DIVISION

APPROVED JUL 18 1986
BY Frank J. [Signature]
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