STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

(Date)

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PO. 80 CSP148 SEE	41740	1	
DISTRIBUTION			
SAMTA FE			
FILE			
U.S.G.B.			
LAMO OFFICE			
TRANSPORTER	016		
	444		
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

LAMO OFFICE			
TRAMSPORTER GAS DECEST FO			
[OPERATOR]			
AUTHORIZATION TO TRANS	PORT OIL AND NATURAL GOS 12 COST 1987		
<u>I</u>			
Operator Olivina Olivi	Dig. 3		
Meridian Oil Inc.			
P. O. Box 4289, Farmington, NM 87499			
Reason(s) for filing (Check proper box)	Other (Please explain)		
New Well Change in Trimsperior of:	•		
Recompletion OII D	for El Paso Production Company		
Change www. Change www. Castagheat Gas Castaghaat Gas Castaghaat Gas	ondensete		
If change of ewnership give name El Paso Natural Gas Compand and address of previous ownerEl Paso Natural Gas Compa	iny, P. O. Box 4289, Farmington, NM 87499		
II. DESCRIPTION OF WELL AND LEASE			
San Juan 29-4 Unit 7 E. Blanco Pic			
	tured Cliffs Stete (Foderel) or Foo SF 079757		
Location D 820 North .	1040 West		
Unit Letter ; Feet From TheLir	ne and Feet From The		
8 _ 29N _			
Line of Section Cownship 2914 Range	4W , NMPM, Rio Arriba County		
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL			
Name at Authorized Transporter at Ct or Condensate	Address (Give address to which approved copy of this form is to be sent)		
	P. O. Box 4289, Farmington, NM 87499		
Alega of Authorises Transcours at Casingnead Gas ar Dry Gas 🛣	P. O. Box 8900, Salt Lake City, UT 84110		
if well produces oil or liquids. D 8 29N 4W	Is gas actually connected? When		
give location of tanze.	<u>। लगानमञ्जानमञ्जाका</u>		
If this production is commingled with that from any other lease or pool,	give comminging order number:		
NOTE: Complete Parts IV and V on reverse side if necessary.			
	OIL CONSERVATION DIVISION		
VI. CERTIFICATE OF COMPLIANCE	[]		
I hereby certify that the rules and regulations of the Oil Conservation Division have	APPROVED NOV -4 1986		
been complied with and that the information given is true and complete to the best of			
my knowledge and belief.	BY		
	Service State of the service of the		
	TITLE STAN DISTANDIST # 8		
Kana (/)_ /	This form is to be filed in compliance with RULE 1104.		
1.14111 Trak	If this is a request for allowable for a newly drilled or deepene		
(Signature)	well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with AULE 111.		
Drilling Clerk	All sections of this form must be filled out completely for silow		
(Tile) 11-1-86	able on new and recompleted wells.		
11-1-00	Sill out only Services 1 17 and UT for changes of owner		

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.