## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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TRANSPORTER	014		
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PERATOR			
PROBATION OFFICE			

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

Form C-104 Revised 10-01-78 Format 06-01-83 Page 1

REQUEST FOR ALLOWARIE

COCC ATION CHAIR	NA ALLOWABLE NAD PORT OIL AND NATURAL GAS	
Operator	TOTAL DE AND HATURAL DAS	
Meridian Oil Inc.		
P. O. Box 4289, Farmington, NM 87499		
Ressen(s) for filing (Check proper box)	Other (Please explain)	
New Woll Change in Transparter of:	Meridian Oil Inc. is Operator	
[C]	for El Paso Production Company	
If change of ewnership give name El Paso Natural Gas Compa	any, P. O. Box 4289, Farmington, NM 87499	
II. DESCRIPTION OF WELL AND LEASE		
Sunray IA Blanco Mesa V	Legae No.	
Location IA Bidico Nesa V	Terde Stete, (Federal by Fee SF 078487C	
Unit Letter E : 1550 Feet From The North Lin	800 West	
Line of Section 5 Township 29N Pange	8W NMPM, San Juan County	
III DESIGNATION OF THANSPORTER OF OF AND MATTER		
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL Name of Authorized Transporter of Cit or Condensate X	Address (Give address to which approved copy of this form is to be sent)	
Meridian Oil Inc.	P. O. Box 4289, Farmington, NM 87499	
Name of Authorized Transporter of Casinghead Gas or Dry Gas A El Paso Natural Gas Company	P. O. Box 4289, Farmington, NM 87499	
If well produces oil or liquids. Unit Sec. Twp. Rgs. give location of tance. E 5 29N 8W	Is gas actually connected? When the theorems and the second secon	
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 COMPILANCE  OIL CONSERVATION DIVISION		
I hereby certify that the rules and regulations of the Oil Conservation Division have	APPROVED	
been complied with and that the information given is true and complete to the best of my knowledge and belief.	8 3 Charles	
	S # Polytracound	
$\nu$		
Jegou Loak	This form is to be filed in compliance with MULE 1104.  If this is a request for allowable for a newly drilled or deepens.	
(Signature)	well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with AULE 111.	
	All sections of this form must be filled out completely for allow	
1191636	sble on new and recompleted wells.  Fill out only Sections I, II, III, and VI for changes of owner.	
(Date)	weil name or number, or transporter, or other such changes of condition.  Separate Forms C-104 must be filed for each pool in multiply completed weils.	