

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

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

Form C-104
Revised 10-01-78
Format 06-01-83
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REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator Meridian Oil Inc.
El Paso Natural Gas Company

Address P.O. BOX 4289, FARMINGTON, NM 87499

Reason(s) for filing (Check proper box)

☐ New Well	☐ Change in Transporter of:	☐ Dry Gas
☐ Recompletion	☐ Oil	☐ Condensate
☐ Change in Ownership	☐ Casinghead Gas	

Other (Please explain) POOL NAME & DEDICATION CHANGE

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>San Juan 29-7 Unit</u>	Well No. <u>511</u>	Pool Name, including Formation <u>BASIN FRUITLAND COAL</u>	Kind of Lease <u>State, Federal or Free</u>	Lease No. <u>SF-079514</u>
Location				
Unit Letter <u>N</u>	<u>910</u>	Feet From The <u>South</u> Line and	<u>1055</u>	Feet From The <u>West</u>
Line of Section <u>18</u>	Township <u>29N</u>	Range <u>7W</u>	County <u>Rio Arriba</u>	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil or Condensate <u>ME</u>	Address (Give address to which approved copy of this form is to be sent) <u>P.O. BOX 4289, FARMINGTON, NM 87499</u>
Name of Authorized Transporter of Casinghead Gas or Dry Gas <u>ME</u>	Address (Give address to which approved copy of this form is to be sent) <u>P.O. BOX 4990, FARMINGTON, NM 87499</u>
If well produces oil or liquids, give location of tanks. <u>Unit K Sec. 18 Twp. 29N Rge. 7W</u>	Is gas actually connected? <u>Yes</u>

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.

[Signature]
(Signature)

REGULATORY AFFAIRS
(Title)

DECEMBER 27, 1988
(Date)

OIL CONSERVATION DIVISION

JAN 17 1989

APPROVED _____, 19 _____

BY [Signature]

TITLE SUPERVISION DISTRICT #3

This form is to be filed in compliance with RULE 110A.

If this is a request for allowable for a newly drilled or deep well, this form must be accompanied by a tabulation of the device tests taken on the well in accordance with RULE 111.

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

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

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