STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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LAND OFFICE			$\overline{}$
TRANSPORTER	OIL		
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OPERATOR			
PRORATION 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

Separate Forms C-104 must be filed for each pool in mul

completed wells.

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

AUTHORIZATION TO TRANS	PORT OIL AND NATURAL GAS		
Operator			
Meridian Oil Inc.			
PO Box 4289, Farmington,	NM 87499		
Reason(s) for filing (Check proper box)	Other (Please explain)		
New Weti Change in Transporter of: Recompletion Oil D	Pool name change		
Change in Ownership Casinghead Gas	ondensate		
If change of ownership give name and address of previous owner			
II. DESCRIPTION OF WELL AND LEASE			
Wood Well No. Pool Name, including F			
1 Recedification	nd Sand State, Federal or Fee FEE		
Unit Letter N : 990 Feet From The South Lir	ne and 1650 Feet From The West		
Line of Section 14 Township 29N Range	11ly , NMPM, San Juan Co-		
HI DESIGNATION OF TRANSPORTED OF OF			
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.	PO Box 4289, Farmington, NM 87499		
Name of Authorized Transporter of Casinghed Gas : or Dry Gas : X	Address (Give address to which approved copy of this form is to be sent)		
El Paso Natural Gas Company	PO Box 4289 , Farmington, NM 87499		
If well produces all or liquids, unit Sec. Twp. Sqc. give location of tanks.	is das detudity connected?		
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.			
	01. 001.0551.45154.51		
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION ORD		
I hereby certify that the rules and regulations of the Oil Conservation Division have	APPROVED MAK 2 1303		
been complied with and that the information given is true and complete to the best of my knowledge and belief.	BY ORIGINAL SIGNED BY ERNIE BUSCH		
DECEMBE	BY ORIGINAL SIGNED DIET #3		
	TITLE DEPUTY OIL & GAS INSPECTOR, DIST. #3		
Jean Machied MARMA	This form is to be filed in compliance with RULE 1104.		
Regulatory Affairs Que Comments	If this is a request for allowable for a newly drilled or deer well, this form must be accompanied by a tabulation of the devitests taken on the well in accordance with AULE 111.		
March 1, 1989	All sections of this form must be filled out completely for a able on new and recompleted wells.		
(Date)	Fill out only Sections I. II. III, and VI for changes of ov- well name or number, or transporter, or other such change of condi-		

Submit to Appropriate District Office State Lease - 4 copies Fee Lease - 3 copies

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-102 Revised 1-1-89

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe. New Mexico 87504-2088

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DISTRICT III 1000 Rio Brazos Rd., Aztac, NM 87410

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

DISTRICT I P.O. Box 1980, Hobbs, NM 88240

WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section Well No. Meridian Oil Inc. Wood 1 Unit Letter Section Township Reage County 74 29 North 11 West San Juan **NMPM** Actual Footage Location of Well: 990 feet from the South 1650 feet from the West line Ground level Elev. Producing Formation Dedicated Acresce: 55091 Aztec Fruitland 60 Fruitland Sand Acres 1. Outline the acronge dedicated to the subject well by colored pencil or hackure marks on the plat below 2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty). 3. If more than one lease of different ownership is dedicated to the well, have the interest of all owners been consolidated by communitization, unitization, force-pooling, etc.? ☐ No Yes If answer is "yes" type of consolidation If suswer is "no" list the owners and tract descriptions which have actually been consolidated. (Use reverse ade of this form if neccessary. No allowable will be assigned to the well until all interests have been consolidated (by communication, unstization, forced-nooling, or otherwise) or until a non-standard unit, eliminating such interest, has been approved by the Division. OPERATOR CERTIFICATION I hereby certify that the information *NOTE: This plat is reissued tained havein in true and complete to the from plat prepared by best of my inowiedge and belief. James P. Heese L.S. 1468 Dated: Jan. 12, 1956 Printed Name Peggy Bradfield Position Regulatory Affairs Meridian Oil Inc. March 1, 1989 SURVEYOR CERTIFICATION I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervison, and that the same is true and correct to the best of my knowledge and belief. 2-16-89 ECEIVE Date Surveyed Neale C. Edwards Signature & Seal of Professional Surveyor 1650 MAR 0 3 1989 CON. DIV. 90 THE T Certificate No. 6857 1650 330 990 1320 1900 2310 2640 2000 1500 1000 500 0 660