STATE OF NEW MEXICO ENERGY NO MINERALS DEPARTMENT

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PROBATION OFFICE			

OIL CONSERVATION DIVISION P. O. 60X 2088 SANTA FE, NEW MEXICO 87501

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

AUTHORIZATION TO TRANSF	PORT OIL AND NATURAL GAS	
Coperator		
El Paso Natural Gas Company		
P. O. Box 4289, Farmington, NM 87499		
Ressen(s) for liling (Cheek proper best)	Qiher (Piesse expisia)	
New Wall Change in Transporter els		
Recompletion CII CII	y Ges	
Change in Ownership Costneheed Goo X Co	indensete .	
If change of ownership give name		
and eddress of previous owner		
II DESCRIPTION OF WEIL AND LEAST	· •	
II. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including Fig.		
Sunray B 1 Blanco Mesa V	Verde Stene Fodor or Foo SF 078208	
Location		
Unit Letter M : 1090 Feet From The South Line	e and 990 Feet From The West	
	Con Tuon	
Line of Section 15 Township 30N Range	10W , NMPM, San Juan County	
THE DESIGNATION OF THE ANGROPHING OF OR AND MATTER A	CIS	
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL Name at Authorized Transporter at Oil are Condensate &	Address (Give address to which approved copy of this form is in St. (set.)	
Meridian Oil Inc.	P. O. Box 1599, Aztec, New Mexico 87410	
Name of Authorized Transporter of Casingness Gas or Dry Gas	Address (Give address to which approved sopy of this form is in an sent)	
El Paso Natural Gas Company	P. O. Box 4289, Farmington, NM 87499	
If well produces oil or liquids. Que location of tents. Unit Sec. Twp. Rec.	Is que actually connected? When	
If this production is commingled with that from any other lease or pool.	give commingling order numbers	
NOTE: Complete Parts IV and V on reverse side if necessary.		
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION	
	JUN à 1.1986	
I hereby cerufy 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	APPROVED	
my knowledge and belief.	ov	
	SUPERVISOR DISTRICT # 3	
This form is to be filed in compliance with RUL 2 1164.		
Signature by	If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation	
Drill Clerk	tests taken on the well in accordance with AULS 111.	
THE STATE OF THE S	All sections of this form must be filled out completely for silone able on new and recompleted wells.	
5-1-96 Fill out only Sections L. II. III. and VI for changes of		
(Date) Jillia	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.	