STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

DISTRIBUTION			
SANTA PE			
PILE			
V.6.0.8.			
LANG OFFICE			
TRANSPORTER	01		
	946		
OPERATOR			
PRODATION 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

REQUEST FOR ALLOWABLE

REC	だ り 【		
[[]] NO/	J	1 1500	

	PORT OIL AND NATURAL GAS NOV 1 1000
Operation Meridian Oil Inc.	OIL COM. DIST. 3
P. O. Box 4289, Farmington, NM 87499	:
	Other (Please explain) Meridian Oil Inc. is Operator for El Paso Production Company andensene
If change of ewnership give name El Paso Natural Gas Compa	iny, P. O. Box 4289, Farmington, NM 87499
II. DESCRIPTION OF WELL AND LEASE Lease Name Schumacher 7 Aztec Picture	.
Unit Letter J: 1500 Feet From The South Lin	
Line of Section 17 Township 30N Range	10W , NMPM, San Juan County
Name of Authorized Transporter of Cit or Condensate X Meridian Oil Inc. Name of Authorized Transporter of Casinghead Gas or Dry Gas X El Paso Natural Gas Company If well produces of or liquids, give location of tanss. J 17 30N 10W	P. O. Box 4289. Farmington. NM 87499 Address (Give address to which approved copy of this form is to be sent) P. O. Box 4289. Farmington. NM 87499 Is gas actually connected?
If this production is commingled with that from any other lease or pool. 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 been complied with and that the information given is true and complete to the best of my knowledge and belief.	APPROVED SUPERVISION DISTRICT # 8
Signature) Drilling Clerk	This form is to be filed in compliance with RULE 1104. 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 tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allow
(Tule) 11-1-86 (Date)	able on new and recompleted wells. 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.