

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

NO. OF FORMS REQUIRED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.A.	
LAND OFFICE	
TRANSPORTER	OIL
	NATURAL GAS
OPERATOR	
PRODUCTION OFFICE	

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

Form C-104
Revised 10-01-78
Format 08-01-83
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REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
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:	Other (Please explain)
☐ Recompletion	☐ Oil	
☐ Change in Ownership	☐ Gas	

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name San Juan	Well No. 10	Pool Name, including Formation Blanco Pictured Cliffs	Kind of Lease State, (Federal) or Fee	Lease No. NM 03202
Location				
Unit Letter M	760	Feet From The South	Line and 1050	Feet From The West
Line of Section 10	Township 30N	Range 10W	San Juan County	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒	Address (Give address to which approved copy of this form is to be sent)
Meridian Oil Inc.	P. O. Box 1599, Aztec, New Mexico 87410
Name of Authorized Transporter of Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Company	P. O. Box 4289, Farmington, NM 87499
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
Unit M Sec. 10 Twp. 30N Rge. 10W	No

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)
Drilling Clerk
(Title)
5-1-86
(Date)

OIL CONSERVATION DIVISION

APPROVED *[Signature]* JUN 11 1986
BY *[Signature]*
TITLE SUPERVISOR DISTRICT 3

This form is to be filed in compliance with RULE 1184.
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 1111.
All sections of this form must be filled out completely for allowable on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of owner, well name, number, or transporter or other such change of condition.
Separate Forms C-104 must be filed for each pool in multiply completed wells.

RECEIVED JUN-11 1986 OIL CON. DIV. DIST. 3
JUN 11 1986