

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
OPERATOR	GAS
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
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator	Meridian Oil Inc.	
Address	PO Box 4289, Farmington, NM 87499	
Reason(s) for filing (Check proper box)	Change in Transporter of:	Other (Please explain)
<input type="checkbox"/> New Well	<input type="checkbox"/> Oil	Pool name change
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Casinghead Gas	
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate	

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease
Blanco 30-12 Fee Com	6	Flora Vista Fruitland Sand	State, Federal or Fee	Fee
Location				
Unit Letter <u>0</u> : <u>990</u> Feet From The <u>South</u> Line and <u>1800</u> Feet From This <u>East</u>				
Line of Section <u>10</u> Township <u>30N</u> Range <u>12W</u> , NMPM, San Juan Co.				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS


Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	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 Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	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 oil or liquids, give location of tanks.	Unit Sec. Twp. Rgs. Is gas actually connected? when

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.


Regulatory Affairs (Signature)
(Title)
March 1, 1989
(Date)

OIL CONSERVATION DIVISION
MAR 29 1989

APPROVED _____, 19____
BY _____ ORIGINAL SIGNED BY ERNIE BUSCH
TITLE _____ DEPUTY OIL & GAS INSPECTOR, DIST. #3

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deep well, this form must be accompanied by a tabulation of the devils tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for all able on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of ow well name or number, or transporter, or other such change of condi.
Separate Forms C-104 must be filed for each pool in mult completed wells.

All distances must be from the outer boundaries of the Section.

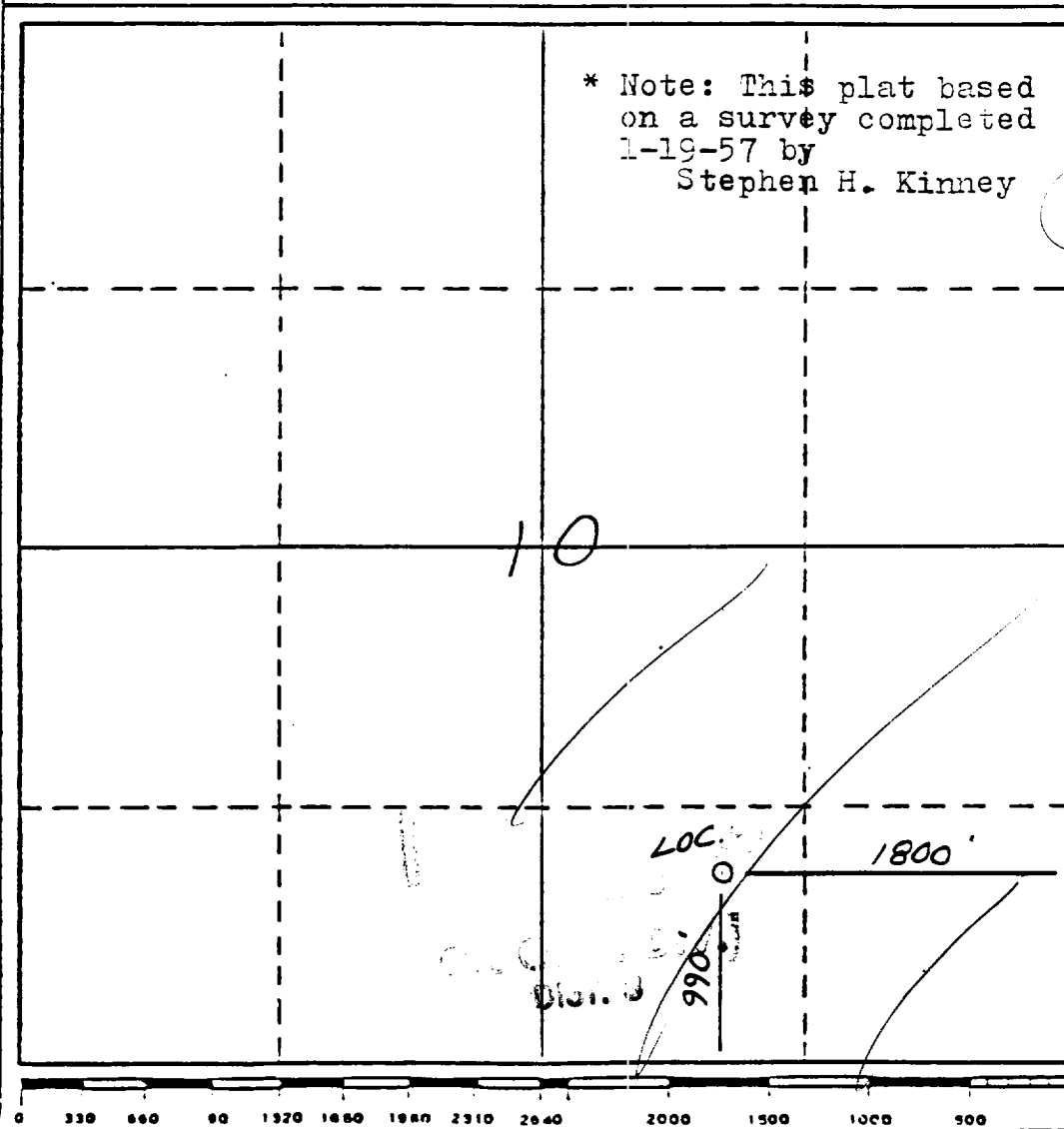
Operator Meridian Oil Inc.			Lease Blanco 30-12 Fee Com.		Well No. 6
Unit Letter 0	Section 10	Township 30 North	Range 12 West	County San Juan	
Actual Footage Location of Well: 990 feet from the South line and 1800 feet from the East line					
Ground Level Elev. 5685'	Producing Formation Fruitland Sand		Pool Flora Vista Fruitland Sand	Dedicated Acreage: 160	

1. Outline the acreage dedicated to the subject well by colored pencil or hatchure 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 work interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

☐ Yes ☐ No If answer is "yes," type of consolidation _____

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) _____

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, force-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Division.



CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

Peggy Bradfield
Name

Peggy Bradfield
Position

Regulatory Affairs
Company

Meridian Oil Inc.

Date
February 24, 1989

I hereby certify that the location shown on this plat was planned from notes of actual surveys made by me under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Neale C. Edwards
Date Surveyed

1-3-89

Registered Professional Engineer and/or Land Surveyor

Neale C. Edwards
Certificate No.

6857