STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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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

AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS I.		
Operator Meridian Oil Inc.		
Address		
P. O. Box 4289, Farmington, NM 87499		
Reason(s) for filing (Check proper box) Other (Please explain)		
New Well Change in Transporter of:	Meridian off Inc. is Operator	
X Change in Child Operatorship Casinghees Gas	Condensese for El Paso Production Company	
If change of ownership give name El Paso Natural Gas Com and address of previous owner El Paso Natural Gas Com	pany, P. O. Box 4289, Farmington, NM 87499	
H DESCRIPTION OF WELL AND LEASE		
II. DESCRIPTION OF WELL AND LEASE Lease Name Well No. Pool Name, including	Formation Kind of Lease Lease No.	
EPNG Com A 2A Blanco Mesa		
D 890 North	1300	
Unit Letter D : 890 Feet From The North	ine and 1190 Feet From The West	
Line of Section 32 Township 31N Range	8W , NMPM, San Juan County	
III. DESIGNATION OF TRANSPORTER OF OIL AND NATUR	AT CAS	
Name of Authorized Transporter of Cit are Condensate 3	Addiess (Give address to which approved copy of this form is to be sent)	
Meridian Oil Inc.	P. O. Box 4289, Farmington, NM 87499 Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Casinghedd Gas or Dry Gas A El Paso Natural Gas Company	Ĭ	
tinit Sec. Two. Roe.	P. O. Box 4289, Farmington, NM 87499	
If well produces oil or liquids. give location of tanks. D 32 31N 8W	्रिक् रिक्टिक्टिक्टि	
If this production is commingled with that from any other lease or poo	I, give comminging order number:	
NOTE: Complete Parts IV and V on reverse side if necessary.		
	0	
VI. CERTIFICATE OF COMPLIANCE	OIL CONSEGNATION	
hereby certify that the rules and regulations of the Oil Conservation Division hav		
been complied with and that the information given is true and complete to the best of my knowledge and belief.	av tout the	
•	SUPERVISION DISTRICT # 3	
,	TITLE	
allen Mi	This form is to be filed in compliance with MULE 1104.	
(Signature)	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	
Drilling Clerk	All sections of this form must be filled out completely for allow-	
(Tule) 11-1-86	able on new and recompleted wells.	
(Dete)	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.	