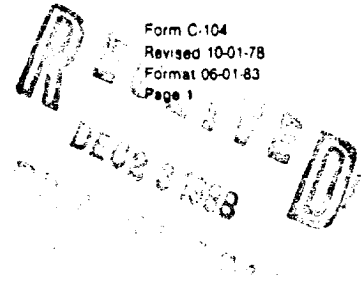


STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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

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FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
OPERATOR	GAS
PRODUCTION OFFICE	

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS



I. Operator  
Meridian Oil, Inc.

Address  
3535 E. 30th-Farmington, NM 87401

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	Other (Please explain) Effective Date: 12/01/88 Change in name of Operator/and Condensate Transporter
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate	

If change of ownership, give name and address of previous owner  
operator 4849 Greenville Ave. Suite 1100,  
C & E Operators, Inc.- Dallas, Texas 75206

II. DESCRIPTION OF WELL AND LEASE

Lease Name Hampton	Well No. 3A	Pool Name, including Formation Blanco, MV	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Unit Letter <u>D</u> : <u>655</u> Feet From The <u>West</u> Line and <u>700</u> Feet From The <u>North</u> Line of Section <u>10</u> Township <u>30N</u> Range <u>11W</u> , NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS


Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Meridian Oil, INC.	Address (Give address to which approved copy of this form is to be sent) 3535 E. 30th-Farmington, NM 87401	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> EPNG Co.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1492-El Paso, Texas 79978	
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. A3D 10 30N 11W	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.

  
(Signature)  
Regulatory Affairs  
(Title)  
12-22-88  
(Date)

OIL CONSERVATION DIVISION

APPROVED DEC 22 1988, 19\_\_\_\_  
BY [Signature]  
TITLE SUPERVISION DISTRICT #3

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 deviated tests taken on the well in accordance with RULE 111.

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 or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.