

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

NO. OF TOWNSHIP SECTIONS	
DISTRICT	
COUNTY	
FILE	
U.S.A.	
LAND OFFICE	
TRANSPORTER	<input type="checkbox"/> OIL <input type="checkbox"/> GAS
OPERATOR	
OPERATING 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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JUL 18 1986

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS
OIL CON. DIV.
DIST. 3

I. Operator
El Paso Natural Gas Company
Address
P. O. Box 4289, Farmington, NM 84799

Reasons for filing (Check proper box)
 New Well
 Recombination
 Change in Ownership
 Change in Transporter of:
 Oil
 Casingshed Gas
 Dry Gas
 Condensate
 Other (Please explain)
 Well reconnected after compressor installed 5-21-86.

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name Fuller	Well No. 3	Pool Name, including Formation Blanco Mesa Verde Ext.	Kind of Lease State, Federal or (Fee)	Lease Fee
Location Unit Letter <u>C</u> : <u>830</u> Feet From The <u>North</u> Line and <u>1530</u> Feet From The <u>West</u>				
Line of Section 22	Township 30N	Range 11W	NMPM. San Juan	C.

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> Meridian Oil Inc.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1599, Aztec, NM 87410
Name of Authorized Transporter of Casingshed Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 4289, Farmington, NM 84799
If well produces oil or liquids, give location of tanks. Unit : <u>C</u> Sec. : <u>22</u> Twp. : <u>30N</u> Rge. : <u>11W</u>	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.

Reggie Cook
(Signature)
Drilling Clerk
(Title)
7-18-86
(Date)

OIL CONSERVATION DIVISION

APPROVED JUL 18 1986
Frank Law
BY _____
TITLE SUPERVISOR DISTRICT # _____

This form is to be filed in compliance with RULE 1108.
If this is a request for allowable for a newly drilled or deep well, this form must be accompanied by a tabulation of the dev tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for applicable on new and recompleted wells.
Fill out only Sections I, II, III, and VI for change of a well name or number, or transporter, or other such change of conditions.
Separate Form C-104 must be filed for each pool in multiple completed wells.