

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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PROMOTION OFFICE	

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

Form C-104
Revised 10-01-78
Format 08-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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OIL CONSERVATION DIV.

I. Operator
Meridian Oil Inc.

Address
P.O. BOX 4289, FARMINGTON, NM 87499

Reason(s) for filing (Check proper box)
☐ New Well
☐ Recompletion
☐ Change in Ownership

Change in Transporter of:
☐ Oil
☐ Casinghead Gas

Other (Please explain)
POOL NAME & DEDICATION CHANGE

Other (Please explain)
POOL NAME & DEDICATION CHANGE

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Mansfield Com	Well No., Pool Name, including Formation 260 BASIN FRUITLAND COAL	Kind of Lease State, (Federal) or Fee	Lease No. SF-045646A
Location Unit Letter E 1490 Feet From The North Line and 1100 Feet From The West Line of Section 28 Township 30N Range 9W NMPM, San Juan County			

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil or Condensate MERIDIAN OIL INC.	Address (Give address to which approved copy of this form is to be sent) P.O. BOX 4289, FARMINGTON, NM 87499
Name of Authorized Transporter of Casinghead Gas or Dry Gas EL PASO NATURAL GAS COMPANY	Address (Give address to which approved copy of this form is to be sent) P.O. BOX 1940, FARMINGTON, NM 87499
If well produces oil or liquids, give location of tanks. Unit Sec. Twp. Rge. E 28 30N 9W	Is gas actually connected? Yes

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.



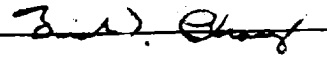
REGULATORY AFFAIRS

DECEMBER 27, 1988

OIL CONSERVATION DIVISION

DEC 30 1988

APPROVED

BY 

TITLE SUPERVISION DISTRICT #3

This form is to be filed in compliance with NMC 2-1104.

If this is a request for allowable for a newly drilled or deep well, this form must be accompanied by a tabulation of the device tests taken on the well in accordance with NMC 2-111.

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 well name or number, or transporter or other such change of conditions.

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

