

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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U.S.D.M.	
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

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DEC 30 1988
OIL CON. DIV.
DIST. 3

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)

☐ New Well
☐ Recompletion
☐ Change in Ownership
☐ Change in Transporter of:
☐ Oil
☐ Gas
☐ Condensate

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 Kelly A Com	Well No. 205	Pool Name, including Formation BASIN FRUITLAND COAL	Kind of Lease State (Federal or Fee)	Lease No. NM-01594
Location Unit Letter K	1485	Feet From The South line and	1460	Feet From The West
Line of Section 15	Township 31N	Range 10W	County San Juan	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil or Condensate	Address (Give address to which approved copy of this form is to be sent)
[Redacted]	P.O. BOX 4289, FARMINGTON, NM 87499
Name of Authorized Transporter of Gas or Dry Gas	Address (Give address to which approved copy of this form is to be sent)
[Redacted]	P.O. BOX 4289, FARMINGTON, NM 87499
If well produces oil or liquids, give location of tanks.	Unit Sec. Two. Rge.
K 15 31N 10W	

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)

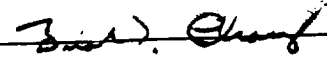
REGULATORY AFFAIRS
(Title)

DECEMBER 27, 1988
(Date)

OIL CONSERVATION DIVISION

DEC 30 1988

APPROVED _____, 19

BY  _____

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 deep well, this form must be accompanied by a tabulation of the deviate tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for a well 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.