

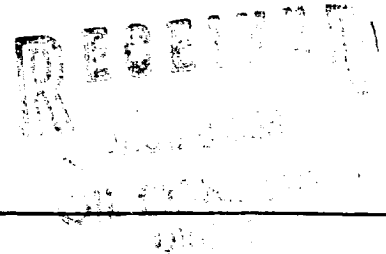
STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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U.S.G.A.	
LAND OFFICE	
TRANSPORTER	☐ OIL
	☐ GAS
OPERATOR	
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

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	☐ Change in Transporter of:	☐ Dry Gas
☐ Recompletion	☐ Oil	☐ Condensate
☐ Change in Ownership	☐ Casinghead Gas	

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 Scott Com	Well No. 205	Pool Name, including Formation BASIN FRUITLAND COAL	Kind of Lease State/ Federal/ pr Fee	Lease No SF-078604
Location Unit Letter <u>A</u> : <u>1180</u> Feet From The <u>North</u> Line and <u>1180</u> Feet From The <u>East</u> Line of Section <u>17</u> Township <u>31N</u> Range <u>10W</u> NMPM, San Juan County				

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) P. O. BOX 4289, FARMINGTON, NM 87499
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent) PO Box 4289, Farmington, NM 87499
If well produces oil or liquids, give location of tanks.	Unit <u>A</u> Sec. <u>17</u> Twp. <u>31N</u> Rge. <u>10W</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.

(Signature)

REGULATORY AFFAIRS
(Title)

DECEMBER 27, 1988
(Date)

OIL CONSERVATION DIVISION

DEC 30 1988

APPROVED _____, 19 _____

BY

TITLE SUPERVISION DISTRICT # 8

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable (or a newly drilled or deeper well, this form must be accompanied by a tabulation of the deviat tests taken on the well in accordance with RULE 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 own well name or number, or transporter, or other such change of condit.

Separate Forms C-104 must be filed for each pool in mult: comPLETED wells.