

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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LAND OFFICE	
TRANSPORTER	OIL
OPERATOR	GAS
PRODUCTION OFFICE	

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-73
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

APR 14 1989
OIL CON. DIV.
BOL. 3

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

☐ Dry Gas

☐ Condensate

Other (Please explain)

POOL NAME & DEDICATION CHANGE

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease
Allison Unit	123	BASIN FRUITLAND COAL	State, Federal or Free	SF-078459B
Location				
Unit Letter	0	1015 Feet From The South Line and 1850 Feet From The East		
Line of Section	9	Township 32N Range 7W	NMPM	San Juan Co.

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)
MERIDIAN OIL INC.		P.O. BOX 1239, FARMINGTON, NM 87401
Name of Authorized Transporter of Casinghead Gas	or Dry Gas	Address (Give address to which approved copy of this form is to be sent)
MERIDIAN OIL INC.		P.O. BOX 4289, FARMINGTON, NM 87499
If well produces oil or liquids, give location of tanks.	Unit	Sec.

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)

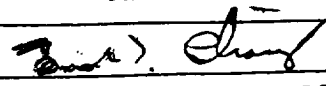
April 5, 1989

(Date)

OIL CONSERVATION DIVISION

APR 14 1989

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

All sections of this form must be filled out completely for able on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of a 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.