Submit 5 Copies Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104

DISTRICT II P.O. Drawer DD, Artena, NM 88210

OIL CONSERVATION DIVISION P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Azzec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION

I.		TO TR	ANSPO	RT OIL	AND NATURAL GAS		
Operator						Well API No.	
MERIDIAN OIL INC.							
Address		· · · · · · · · · · · · · · · · · · ·					
21 Desta Drive	Midla	nd. Te	xas	79705			
Reason(s) for Filing (Check proper box	;)				Other (Please explain)		
New Well		Change is	Transport	ter of:	Effectiv	re 2-1 -89	
Recompletion	Oil		Dry Gas			,	
Change in Operator XX	Casinghe	ad Gas	Condens	ate 🗌			
If change of operator give name and address of previous operator	Doyle Ha	rtman	Р.	O. Box	: 1861 Midland,	Texas 79702	
IL DESCRIPTION OF WEL	L AND LE	ASE					
Lease Name Ellen Weir		Well No.	Pool Nas	Eumo	ng Formation nt (Gas) Y-5R-QN	Kind of Lease Scale: Federal for Fee	Lease No.
Location					/ / **		
Unit LetterM	:6	60	_ Feet From	m The	S Line and 330	Feet From The	W Line
Section 3 Town	hip 20-	-S	Range	3	7-Е , ммрм ,	Lea	County
III DESIGNATION OF TRA	NCDODT	2D OF 0	TT 4 3 170				
IH. DESIGNATION OF TRA Name of Authorized Transporter of Oil	UNSPURIT	or Conde		NATU			
		0. 0000			Address (Give address to which a	ipproved copy of this form	is to be sent)
Name of Authorized Transporter of Ca	tinghead Gas		or Dry C	as XXI	Address (Give address to which a	received some of this face.	<u> </u>
El Paso Natural Gas	Company		•	- 22.22		l Paso, Tx.	79 97 8
If well produces oil or liquids, rive location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When?	79978
VI OPERATOR CEPTIE	CATEO	COLO	DT TARI	<u> </u>	yes	2-12-	-82
VI. OPERATOR CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation					OIL CONSERVATION DIVISION		
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.							
				Date Approved	MAR	8 1989	
Signature /// Euchace					ByORIGINAL SIGNED BY JERRY SEXTON		
Connie Monahan Operations Tech III					-,	DISTRICT I SUPER	VISOR
Printed Name 2-24-89			Title 86-568	1	Title		
Date			00-J00				

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.