

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

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator
Meridian Oil Inc.

Address
21 Desta Drive, Midland, Texas 79705

Reason(s) for filing (Check proper box)		Other (Please explain)
New Well ☐	Change in Transporter of: Oil ☐ Dry Gas ☐ Casinghead Gas ☐ Condensate ☐	Meridian Oil Inc is Operator for El Paso Production Company
Recompletion ☐		
Change in xxxxxx ☒ Operator		

If change of ownership give name and address of previous owner El Paso Natural Gas Co., 1800 Wilco Building, Midland, Tx 79701

DESCRIPTION OF WELL AND LEASE

Lease Name <u>Brownlee</u>	Well No. <u>1</u>	Pool Name, Including Formation <u>Eumont (Yates-7Rivers-Queen)</u>	Kind of Lease State, Federal or Fee <u>Fee</u>	Lease
Location				
Unit Letter <u>0</u>	<u>760</u>	Feet From The <u>South</u> Line and <u>1980</u>	Feet From The <u>East</u>	
Line of Section <u>25</u>	Township <u>21S</u>	Range <u>36E</u>	NMPM, <u>Lea</u>	

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)
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)
<u>El Paso Natural Gas Co.</u>	<u>P. O. Box 1492, El Paso, Texas 79978</u>
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
<u>0 25 21S 36E</u>	<u>Yes Unknown</u>

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 above is true and complete to the best of my knowledge and belief.

Cathy Nokes
Cathy Nokes
(Signature)
Engineering Tech III
(Title)
9/11/86
(Date)

OIL CONSERVATION DIVISION

APPROVED 10/11/86, 19
BY ORIGINAL SIGNED BY JERRY TEXON
DISTRICT 1 SUPERVISOR
TITLE _____

This form is to be filed in compliance with RULE 106.
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the pressure tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for all wells 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.
Separate Form C-104 must be filed for each pool in newly recompleted wells.