Submit 5 Copies		ew Mexico		E C 104
Appropriate District Office DISTRICT I	Energy, Minerais and Nat	urai Resources Department		Form C-104 ' Revised 1-1-89
P.O. Box 1980, Hobbs, NM 88240				And Manualine
DISTRICT II	OIL CONSERVA	TION DIVISION		secondarie or tafe
P.O. Drawer DD, Artenia, NM 88210		ox 2088		
DISTRICT III	Santa Fe, New M	exico 87504-2088		
1000 Rio Brazos Rd., Aztec. NM 87410 *				
, REG	QUEST FOR ALLOWAR	BLE AND AUTHORIZA	TION	
I.	TO TRANSPORT OIL	AND NATURAL GAS	•	
Operator			Well API No.	
MERIDIAN OIL INC.				
Address				
<u>21 Desta Drive</u> Mid1	and Texas 79705			
Reason(s) for Filing (Check proper box)		Other (Please explain)		
New Well	Change in Transporter of:	Effectiv	ve 2-1 -89	
Recompletion Oil	🛄 Dry Gas 🛄			
	head Gas Condensate			
If change of operator give name and address of previous operator Doyle H	artman P.O. Boy	1861 Midland,	Texas 79702	
			10443 79702	,
IL DESCRIPTION OF WELL AND L				
Lesse Name	Well No. Pool Name, Includi	ng Formation	Kind of Lease	Lease No.
Otis L. Jones		es-7 Rivers)	State Frederick or Fee	
Location	7			L
Unit Letter :	650 Feet From The	S Line and 1750	Feet Ferry The	Е
		S Line and 1750	Feet From The	E Line
Unit Letter :		S Line and 1750 36-E , NMPM,	Feet From The Lea	Line
Section 34 Township	22-S Range	36-Е , МИРМ ,		E Line County
Section 34 Township	22-S Range	36-Е , NMPM , RAL GAS	Lea	County
Section 34 Township	22-S Range	36-Е , МИРМ ,	Lea	County
Section 34 Township III. DESIGNATION OF TRANSPORT Name of Authorized Transporter of Oil	22-S Range	Address (Give address to which a	Lea pproved copy of this form	Line County
Section 34 Township III. DESIGNATION OF TRANSPORT Name of Authorized Transporter of Oil Name of Authorized Transporter of Casinghead Gau	22-S Range TER OF OIL AND NATU or Condensate • • or Dry Gas	36-Е , NMPM , RAL GAS	Lea pproved copy of this form	Line County
Section 34 Township III. DESIGNATION OF TRANSPORT Name of Authorized Transporter of Oil Name of Authorized Transporter of Casinghead Gas E1 Paso Natural Gas Compan	22-S Range TER OF OIL AND NATUR or Condensate • • • • • • • • • •	Address (Give address to which a P.O. Box 1492 E	Lea pproved copy of this form pproved copy of this form	Line County
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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
- 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.