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

State of New Mexico Energy, Minerais and Naturai Resources Department

Form C-104

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

OIL CONSERVATION DIVISION P.O. Box 2088

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

Santa Fe, New Mexico 87504-2088

I.	TEG	TOTE	OH AL	TOWA	BLE AND AUTH	HORIZA"	TION		
Operator		10 11	MINOP	JHT OI	LAND NATUR	AL GAS	Well API No.		
MERIDIAN OIL INC.							WELL AFT NO.		
Address							<u> </u>		
21 Desta Drive	Midla	nd. Te	exas	79705					
Reason(s) for Filing (Check proper box)					Other (Plea	te emicin)			
New Well	Change in Transporter of:								
Recompletion	Oil	Oil Dry Gas Effective 2-1 -89							
Change in Operator XX	Casinghe	ad Gas [Conden	sate					
If change of operator give name and address of previous operator Do	yle Ha	rtman	P	.O. Bo	x 1861 M	idland,	Texas 79702		
IL DESCRIPTION OF WELL	AND LE	ASE					137.02		
Lease Name		Well No.	Pool No	me includ	ing Formation				
J.H. King		1				100	Kind of Lease	Lease No.	
Location	·			almat	(Gas)	1-5R	X TOTAL XX Fee		
Unit Letter	<u>: 33</u>	0	Feet Fre	m The	S Line and	330		W	
				120	Line and		Feet From The	Line	
Section 6 Townshi	p 2	3-S	Range	37	-E NMPM		Lea	_	
III DESIGNATION OF THE								County	
III. DESIGNATION OF TRAN Name of Authorized Transporter of Oil	SPORT	ER OF C	IL ANI	NATU	RAL-GAS				
reastile of Altinonzed Transporter of Oil or Condensate Address (Give address to which approve							pproved copy of this form	is to be sent)	
Name of Authorized Transporter of Cosin									
Name of Authorized Transporter of Casinghead Gas or Dry Gas XX Address (Give address to which approved copy of this form is to be sent)									
El Paso Natural Gas C					P.O. Box 14	492 E		79978	
give location of tanks.	Unit	Sec.	Twp	Rge.	is gas actually connec	ted?	When?	<i>55</i> 70	
VI. OPERATOR CERTIFIC	ATEO	COLO	DT TANK	<u></u>	yes		unkno	wn	
I bereby certify that the rules and mouth	WIE OI	COM	PLIAN	CE.	0, 0	20110-			
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.									
(1 _ 7/1/ 11/					Date Approved MAR 1 0 1989				
June // Malla									
Signature					By Orig. Signed by				
Connie Monahan Operations Tech III Printed Name Title							Geologi	<u></u>	
2-24-89	015/6	Title		FientoRu	3 T				
Date			86-568 phone No.		11116			····	
		100	THE NO.		1				

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.



RECEIVED

MAR 1 1989

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