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

I.

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

## DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410

## State of New Mexico Energy, Minerais and Natural Resources Department

Form C-104 Res and 1-1-89 n of Page at B

## **OIL CONSERVATION DIVISION**

P.O. Box 2088 Santa Fe, New Mexico 87504-2088

## REQUEST FOR ALLOWABLE AND AUTHORIZATION

TO TRANSPORT OIL AND NATURAL GAS	_
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	_

MERIDIAN OIL INC.	Well API No.	
Address		
21 Desta Drive Midland, Texas 79705		
	(Please explain)	
New Well Change in Transporter of:	Effective 2-1 -89	
Recompletion Oil Dry Gas		
Change in Operator XX Casinghead Gas Condensate		
If change of operator give name and address of previous operator Doyle Hartman P.O. Box 1861 Mi	dland, Texas 79702	
IL DESCRIPTION OF WELL AND LEASE		
Lesse Name Well No. Pool Name, Including Formation	Kind of Lease Lease No.	
Farnsworth 4 12 Langlie Mattix S	R.QN-GB State, Federal or Frex 1.C-054668	
Location		
Unit LetterE :1650 Feet From TheN Line :	and Feet From The W	
Section 4 Township 26-S Range 37-E , NM	PM, Lea County	
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS		
	address to which approved copy of this form is to be sent)	
Texas-New Mexico Pipeline P.O. Box 2528 Hobbs, N.M. 88240		
Name of Authorized Transporter of Casinghead Gas X or Dry Gas Address (Give address to which approved copy of this form is to be sent)		
El Paso Natural Gas Company P.O. Bo:	<u>x 1492 El Paso, Tx.</u> 79978	
If well produces oil or liquids, Unit Sec.   Twp.   Rge. is gas actually of give location of tanks.		
	yes 8-4-61	
VI. OPERATOR 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 bestef.		
Date Approved		
Annio Monahan		
Signature By ORIGINAL SIGNED BY JERRY SEXTOR		
Connie Monahan Operations Tech III DISTRICT I SUPERVISOR		
Printed Name		
<u>2-24-89</u> 915-686-5681 Title		
Date Telephone No.		

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.