

OIL CONSERVATION DIVISION
P. O. BOX 2000
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-1-70

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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DISTRIBUTION	
SANTA FE	
FILE	
U.S.O.	
LAND OFFICE	
TRANSPORTER	
OPERATOR	
PROMOTION OFFICE	

1. Operator Meridian Oil Inc.

Address 21 Desta Drive Midland, Texas 79705

Reason(s) for filing (Check proper box)

New Well	☐	Change in Transporter of:	
Recompletion	☐	Oil	☐
Change in Ownership	☒	Casinghead Gas	☐
		Dry Gas	☐
		Condensate	☐

Other (Please explain) Meridian Oil Inc. is Operator for El Paso Production Company

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease
<u>Farnsworth "C"</u>	<u>2</u>	<u>Rhodes (Yates-7Rivers) Gas</u>	<u>State, Federal or Free Federal LC-054668</u>
Location			
Unit Letter <u>G</u>	<u>1650</u>	Feet From The <u>North</u> Line and <u>1650</u>	Feet From The <u>East</u>
Line of Section <u>4</u>	To Township <u>26S</u>	Range <u>37E</u>	NMPM, Lea

III. 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.	Is gas actually sold? When
Unit <u>G</u> Sec. <u>4</u> Twp. <u>26S</u> Rge. <u>37E</u>	<u>Yes</u> <u>Unknown</u>

IV. 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.

Carly Rhodes
(Signature)
Engineering Tech III
11/5/86
(Date)

OIL CONSERVATION DIVISION

APPROVED NOV 12 1986
BY ORIGINAL SIGNED BY JERRY ELLISON
TITLE DISTRICT SUPERVISOR

This form is to be filed in compliance with Rule 10.1.
If this is a request for allowable for a newly drilled or recompleted well, this form must be accompanied by a tabulation of the division tests taken on the well in accordance with Article III.
All sections of this form must be filled out completely for all able on new and recompleted wells.
Fill out only Sections I, II, III, and VI for existing wells. Well name or number, or transporter or other to be filled out.
Separate Form C-104 must be filed for each well to be recompleted.

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NOV 10 1986
C. C. C.
HOBBS OFFICE