

OIL CONSERVATION DIVISION

P. O. BOX 2000

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES RECEIVED	
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SANTA FE	
FILE	
U.S.D.C.	
LAND OFFICE	
TRANSPORTER	
OPERATOR	
PROMOTION OFFICE	

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 ☐ Dry Gas ☐
Change in ~~Operator~~ ☒ Operator Casinghead 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 Rhodes Storage Unit	Well No. 24	Pool Name, Including Formation Rhodes Storage (Y-7R)	Kind of Lease State, Federal or Fee Federal LC-030176-B
Location Unit Letter N ; 1780 Feet From The West Line and 660 Feet From The South Line of Section 15 Township 26S Range 37E NMPM, Lea County			

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)
El Paso Natural Gas Co.	P. O. Box 1492, El Paso, Texas 79978
If well produces oil or liquids, give location of tanks.	Is gas actually separated? When
N 15 26S 37E	Yes Unknown

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.

Cathy Hobbs
(Signature)

Engineering Tech III

11/5/86

(Date)

OIL CONSERVATION DIVISION

NOV 14 1986

APPROVED _____, 19__

BY _____

TITLE _____

This form is to be filed in compliance with RULE 100.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviated tests taken on the well in accordance with RULE 101.

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 name, well number or number, or transporter, or other such change of ownership.

Separate Form C-104 must be filed for each pool in recompleted wells.