

NO. OF EMPLOYEES RECEIVED		
CITY OF RESIDENCE		
BAPTIST		
FIRE		
U.S. B.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PROMOTION OFFICE		

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Meridian Oil Inc.

Address

21 Desta Drive Midland, Texas 79705

Reason(s) for Filing (Check proper box)

New Well

Change in Transporter of:

Recompletion

C11

Dry Can

Change in ~~XXXXXXXXXX~~ 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

21. DESCRIPTION OF WELL AND LEASE

Lessee Name Harrison	Well No. 1	Foot Name, Including Formation Jalmat Tansil (Yates-7Rivers)	Kind of Lease State, Federal or Free Federal LC-032579-F
Location Unit Letter L ; 1980 Feet From The South Line and 660 Feet From The West Line of Section 27 Township 25S Range 37E , NMPM, Lea			

2. 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 ☒ El Paso Natural Gas Co.					Address (Give address to which approved copy of this form is to be sent) P. O. Box 1492, El Paso, Texas 79978	
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually collected?	When
	L	27	25S	37E	Yes	Unknown

.. 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 Trokes
(Signature)

(Signature)

Engineering Tech III

(: (')

11/5/86

(1904)

OIL CONSERVATION DIVISION

APPROVED NOV 1 9 1986

BY ORIGINAL SIGNED BY JERRY COTTON

TITLE _____ DISTRICT 1 SUPERVISOR _____

This form is to be filed in compliance with F.B.I. reg.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the chemical tests taken on the well in accordance with Article 114.

All sections of this form must be filled out completely for all able on new and reconstructed walls.

Fill out only Sections I, II, III, and VI for changes of name, well name or number, or transportation of other facilities of a well.

Separate Form C-107 must be filed for each individual covered by the Form C-107.