Submit 5 Copies	State of N	lew Mexico		
Appropriate District Office DISTRICT I	Energy, Minerais and Na	tural Resources Department		Form C-104 Regime 1-1-89
P.O. Box 1980, Hobbs, NM 88240				Canada and a second second
DISTRICT II	OIL CONSERVA	ATION DIVISION		at.Remon of Page
P.O. Drawer DD, Artesia, NM 88210		lox 2088		
DISTRICT III	Santa Fe, New M	lexico 87504-2088		
1000 Rio Brazos Rd., Aztec, NM 87410	REQUEST FOR ALLOWA			
I.	TO TRANSPORT OF	BLE AND AUTHORIZA	FION	
Operator		LAND NATURAL GAS		
MERIDIAN OIL INC.			Well API No.	
Address				
<u> </u>	idland. Texas 79705			
Reason(s) for Filing (Check proper box)	idland, Texas 79705	Other (Please explain)		
New Well	Change in Transporter of:	Effective	2-1 -80	
Recompletion O	il 🗌 Dry Gas 🛄	BITCCFIA	2 2 1 -09	
	asinghead Gas 🔲 Condensate			
If change of operator give name and address of previous operator Doy1	e Hartman P.O. Box	v 1961 Md 41 - 1		
		x 1861 Midland,	<u>Texas</u> 79702	
IL DESCRIPTION OF WELL AN				
Lease Name	Well No. Pooi Name, includi	ing Formation	Kind of Lease	Lease No.
Winningham	8 Jalmat (Gas) TYates -> 2	Sine Federal XX Fee	
	BBC/E + 2335/8	Unit 9		·
Unit Letter0 :	1160 Feet From The	S Line and 1610	Feet From The	Е
Section 19 Township	25-S Range	<u>37-E</u> , NMPM,	Lea	County
III. DESIGNATION OF TRANSPO	OPTED OF OIL AND MATT			
Name of Authorized Transporter of Oil	ORTER OF OIL AND NATU			
		Address (Give address to which a	pproved copy of this form	is to be sent)
Name of Authorized Transporter of Casinghea	d Gas or Dry Gas XX	Address (Cinc add		
FI Pass Natural Cas (one day so this form is to be sent)				
If well produces oil or liquide,		is gas actually connected?		79978
give location of tanks.			When?	- 0 /
VI. OPERATOR CERTIFICAT	E OF COMPLIANCE	yes	January, 1	
I hereby certify that the rules and regulations of the Oil Concentration				
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.			-	
to the other contracts to the best of the know	Date Approved	MAR 1	1 1969	
Chenic VIIIo and a		Dare vhbloved -		
Signature			Orig. Signed by	
Connie Monahan Operations Tech III		Ву	Paul Kaut	Z
Printed Name	Title		Geologist	
2-24-89 915/686-5681		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

2) All sections of this form must be filled out for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
Separate Form C-104 must be filed for each pool in multiply completed wells.

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