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

I.

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

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104 أملاملا ال of Page

OIL CONSERVATION DIVISION

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

TO TRANSPORT OIL AND NATURAL GAS

Operator	Well API No.
MERIDIAN OIL INC.	
Address	
<u>21 Desta Drive Midland, Texas</u> 797	05
Reason(s) for Filing (Check proper box)	Other (Please explain)
New Well Change in Transporter of:	Effective 2-1 -89
Recompletion U Oil Ury Gas	
Change in Operator XX Casinghead Gas Condensate	
If change of operator give name Doyle Hartman P.O.	Box 1861 Midland, Texas 79702
IL DESCRIPTION OF WELL AND LEASE Vell No. Pool Name, in	
	Cas) T-Yates - S P States Follow Formation Kind of Lease Lease No.
E.J. Wells 16 Jalmat	(Gas) T-Yates - SR Stree Foderal or Free LC-055546
3010	S
Unit Letter :2310 Feet From The	Line and Feet From The Line
Section 5 Township 25-S Range	37-E MMPM Lea County
	37-E, 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 Company	P.O. Box 1492 El Paso, Tx. 79978
If well produces oil or liquids, Unit Sec. Twp.	Rgs. is gas actually connected? When ?
give location of tanks.	yes 10-84
VI. OPERATOR CERTIFICATE OF COMPLIANCE	
I hereby certify that the rules and regulations of the Oil Conservation	OIL CONSERVATION DIVISION
Division have been complied with and that the information given above is true and complets to the best of my knowledge and belief,	MAR 7 1989
A CONTRACTOR OF AN ONLY AND	Dete Annual
Benio Manlac	ByORIGINAL SIGNED BY JERRY SEXTON
Signature	ByORIGINAL SIGNED BY JENNISOR
<u>Connie Monahan</u> Operations Tech III	ByORIGINAL SIGNED BY JENNISOR
Printed Name Title	- 1
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 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.