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Date

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104 4 1-1-89

DISTRICT II P.O. Drawer DD, Artesia, NM 88210 OIL CONSERVATION DIVISION P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III
1000 Rio Brazos Rd., Azzec, NM, R7410

I.	REQUEST	FOR ALLOWA	BLE AND AUTHORIZA	TION	
Operator	101	HANSPORT OF	LAND NATURAL GAS		
				Well API No.	
MERIDIAN OIL INC.					
Address					
21 Desta Drive	Midland, T	Cexas 79705			
Reason(s) for Filing (Check proper box)		<u> </u>	Other (Please explain)		·
New Well	Change	n in Transporter of:			
Recompletion	Oil	Dry Gas	Effectiv	re 2-1 -89	
Change in Operator	Casinghead Gas	Condensate			
If change of operator give name and address of previous operator	yle Hartman	P.O. Box	x 1861 Midland	Texas 79702	
IL DESCRIPTION OF WELL	AND LEASE			,	
Lease Name	Well N	io. Pool Name, includ	F-		
Toby	3		tes-7 Rivers)	Kind of Lease XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	Lease No.
Location					
Unit LetterL	: 1780	Feet From The	S Line and 11.00	Feet From The	Line
					Line
Section 7 Townshi	p 24-S	Range 37-	E NILIDRA	Lea	
			, idvirivi,	Lea	County
III. DESIGNATION OF TRAN	SPORTER OF	OIL AND NATU	, idvirivi,	Lea	County
Section 7 Townshi III. DESIGNATION OF TRAN Name of Authorized Transporter of Oil	SPORTER OF		, idvirivi,		
IH. DESIGNATION OF TRAN	ISPORTER OF COR	OIL AND NATU	RAL GAS Address (Give address to which a	approved copy of this form is	to be sent)
III. DESIGNATION OF TRAN Name of Authorized Transporter of Casing	SPORTER OF Or Cons	OIL AND NATU	RAL GAS Address (Give address to which a	approved copy of this form is approved copy of this form is	to be sent)
III. DESIGNATION OF TRAN Name of Authorized Transporter of Casing El Paso Natural Gas C	SPORTER OF Or Com ghead Gas Ompany	OIL AND NATU	RAL GAS Address (Give address to which a P.O. Box 1492	approved copy of this form is approved copy of this form is 21 Paso, Tx. 79	to be sent)
III. DESIGNATION OF TRAN Name of Authorized Transporter of Casing	SPORTER OF Or Cons	OIL AND NATU	RAL GAS Address (Give address to which a	approved copy of this form is approved copy of this form is 21 Paso, Tx. 79	to be sent) to be sent) 9978
III. DESIGNATION OF TRAN Name of Authorized Transporter of Casing El Paso Natural Gas C If well produces oil or liquids, jive location of tanks.	SPORTER OF Or Cons ghead Gas Ompany Unit Sec.	OIL AND NATU densate or Dry Gas XX	RAL GAS Address (Give address to which a P.O. Box 1492	approved copy of this form is approved copy of this form is 21 Paso, Tx. 79	to be sent) to be sent) 9978
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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.

915/686-5681

Telephone No.

- 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.

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