Appropriate District Office DISTRICT I O. Box 1980, Hobbs, NM 88240

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

**OIL CONSERVATION DIVISION** 

Energy, Minerais and Natural Resources Department

Reviseu 1-1-09 See Instructions at Bottom of Page

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

perator meyaco Inc						Well A	1 140.			
TEXACO Inc.					<u>.</u>					
3300 N. Butle:	r, Farming	ton,	NM 87	401						
eason(s) for Filing (Check proper box)					r (Piease explai					
ew Well		Change in Transporter of:  Oil				Giant Industries Inc., now it is Meridian Oil company effective 10-1-8				
ecompletion	Oil Casinghead Gas			Meri	dian Oi	1 comba	ny err	ective	10-1-0	
change of operator give name										
d address of previous operator	<del> </del>	<del></del>						· · · · · · · · · · · · · · · · · · ·	<del></del> -	
. DESCRIPTION OF WELL	L AND LEASE			-	·	1 50 6	n Pas	1 1 1		
ease Name		Well No.   Pool Name, Including 6A Blanco Me			State Fo			Lease Fed Lease No. oderal or Fee SF 079600		
C. W. R oberts	<u> </u>	ALE	Blanco M	esa Ver	de					
Unit LetterE	. 1660	Fee	From The	N time	and 82	:0 Fee	1 From The	W	Line	
Section 18 Towns	thip 25N	Ran	ige 3W	, N	MPM, R	io Arr	i.ba		County	
I. DESIGNATION OF TRA	NSPORTER O	F OIL A	AND NATII	RAL GAS						
lame of Authorized Transporter of Oil		ondensate			e address to wh	ich approved	copy of this fo	orm is to be se	u)	
Meridian Oil compay				P. O. Box 4289, Farmington, NM 87499						
lame of Authorized Transporter of Car	Address (Give address to which approved copy of this form is to be sent)  3300 N. Butler, Farminton, NM 87401									
TEXACO Inc.	lua lea	læ.	- 1 8			When	<del></del>	NM 8	7401	
well produces oil or liquids, ve location of tanks.	Unit Sec.	•	p.   kge. 25N 3W	Yes	y connected?	) When	, 4-14-	-82		
this production is commingled with the					ber:	I	717.	02		
V. COMPLETION DATA										
Designate Type of Completic		Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Spudded	Date Compl. Re	ady to Pro	l	Total Depth	1	J	P.B.T.D.	L	J	
	,									
levations (DF, RKB, RT, GR, etc.)	Name of Produc	Name of Producing Formation			Top Oil/Gas Pay			Tubing Depth		
Perforations		<u> </u>			Depth Casing Shoe					
Circiacions								ng bilov		
	TUB	ING, CA	ASING AND	CEMENT	NG RECOR	D D				
HOLE SIZE	CASING	CASING & TUBING SIZE		DEPTH SET				SACKS CEMENT		
· · · · · · · · · · · · · · · · · · ·				ļ			<del> </del>	<del> </del>		
<del></del>				<u> </u>						
		<del></del>	·			1	-			
. TEST DATA AND REQU	EST FOR ALL	OWAB	LE	<del></del>			150	FIWE	n	
	er recovery of total v	olume of l	oad oil and mus					for full 24 hot	rs)	
Date First New Oil Run To Tank	Date of Test	Date of Test			Producing Method (Flow, pump, gas lift, &					
Length of Test	Tubing Pressure	Tubing Pressure			Casing Pressure			Choke Size		
Actual Prod. During Test	Oil - Bbls.			Water - Bbls.			Gas- MCF			
				1	·					
GAS WELL				160- 6- 1			-121	<del>&gt;</del>		
ctual Prod. Test - MCF/D Length of Test			Bbls. Condensate/MMCF			Gravity of Condensate				
Testing Method (pitot, back pr.)	Tubing Pressur	Tubing Pressure (Shut-in)			Casing Pressure (Shut-in)			Choke Size		
VI. OPERATOR CERTIF	FICATE OF C	OMPL	IANCE		011 00	NOTEN	ATION	DIVION	<b>~</b>	
I hereby certify that the rules and a	_				OIL CO	NSEHV	AHON	DIVISI	ואכ	
Division have been compiled with and that the information given above is true and complete to the best of my knowledge and belief.							CED 9 8 1000			
1.4					e Approv		SEP 28 1989			
SIGNED: A. A.	KLEIER			ll n		3	ハ)	ham!		
Signature				∥ By.				DISTRICT	# 3	
Printed Name Cro. 2 c Title					e	SUPER	VATOTOM	DISTUICE	. <del>#</del> •	
SEP 28 iso				11 110	<u> </u>					
Date		Teleph	ione 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.