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

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

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

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

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

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator Meridian Oil Inc.	Well API No. 30-045- 05707
Address PO Box 4289, Farmington, NM 87499	
Reason(s) for Filing (Check proper box) New Well ☒ Change in Transporter of: Recompletion ☒ Oil ☐ Dry Gas ☐ Change in Operator ☐ Casinghead Gas ☐ Condensate ☐	
If change of operator give name and address of previous operator	

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OIL CON. DIV.
DIST. 3

II. DESCRIPTION OF WELL AND LEASE

Lease Name Huerfano Unit	Well No. 59	Pool Name, including Formation Basin Fruitland Coal	Kind of Lease State, Federal or Fee	Lease No. SF-078103
Location Unit Letter <u>B</u> : <u>890</u> Feet From The <u>North</u> Line and <u>1750</u> Feet From The <u>East</u> Line Section <u>26</u> Township <u>26</u> Range <u>9</u> , <u>NMPM</u> San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒ Meridian Oil Inc. 1428710	Address (Give address to which approved copy of this form is to be sent) PO Box 4289, Farmington, NM 87499
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒ El Paso Natural Gas Company 1428730	Address (Give address to which approved copy of this form is to be sent) PO Box 4990, Farmington, NM 87499
If well produces oil or liquids, give location of tanks.	Unit <u>B</u> Sec. <u>26</u> Twp. <u>26</u> Rge. <u>9</u> is gas actually connected? <u>—</u> When ?
If this production is commingled with that from any other lease or pool, give commingling order number: <u>R-9921</u>	

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well ☐	Gas Well ☒	New Well ☒	Workover ☐	Deepen ☐	Plug Back ☐	Same Res'v ☐	Diff Res'v ☒
Date Spudded 10-07-56	Date Compl. Ready to Prod. 11-12-93		Total Depth 2165'		P.B.T.D. 2099'			
Elevations (DF, RKB, RT, GR, etc.) 6466' GR	Name of Producing Formation Fruitland Coal		Top Oil/Gas Pay 1926'		Tubing Depth 2060'			
Performances 1926-2055'					Depth Casing Shoe			

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
13 3/4"	8 5/8"	127'	
8 3/4"	5 1/2"	2165'	
	2 3/8"	2060'	

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)			
Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas- MCF

GAS WELL

Actual Prod. Test - MCF/D 71 mcf-d-fruitland coal 57 mcf-d- pictured cliffs	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (past, back pr.) backpressure	Tubing Pressure (Shut-in) SI 180	Casing Pressure (Shut-in) SI 180	Choke Size

VI. OPERATOR 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.

Signature

Peggy Bradfield Regulatory Rep.

Printed Name

Title

1-28-94

326-9700

Date

Telephone No.

OIL CONSERVATION DIVISION

Date Approved APR 07 1994

By ORIGINAL SIGNED BY ERNIE BUSCH

Title DEPUTY OIL & GAS INSPECTOR, DIST. 33

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.