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## State of New Mexico Energy, Minerals and Natural Resources Department

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

## OIL CONSERVATION DIVISION

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

| RICT II<br>Drawer DD, Artesia, NM 88210   | Sar  | P.O. Box<br>na Fe, New Mexi                        | ico 87504-2088   |  |  |
|---|--|--|--|--|--|
| RICT III<br>) Rio Brazos Rd., Aziec, NM 87410   |  |  | E AND AUTHORIZAT   | MON  |  |
| -   | TOTAL  | NSPORT OIL   | AND NATURAL GAS  |  |  |
|   | 10 1111  | 110. 01.   |  | Well API No.   | 1  |
| MOCO PRODUCTION COMPAN  | <u>Y</u>   |  |  | 300390717200   |  |
| hess<br>.O. BOX 800, DENVER, Co   | OLORADO 8020   | 1  | Other (Please explain)   |  |  |
| ison(s) for liling (Check proper box)   | Change in  | Transporter of:                                    |  |  |  |
| w Well  |  | Dry Gas  |  |  | İ  |
| completion :  | · ·  | Condensate   |  |  |  |
| ange in Operator L. hange of operator give name   |  |  |  |  |  |
| address of previous operator  |  |  |  |  |  |
| DESCRIPTION OF WELL A   | ND LEASE   | Pool Name, Including                               | r Formation  | Kind of Lease  | Lease No.                                      |
| ase Name<br>AN JUAN 28 7 UNIT   | 37   | BLANCO PC S  | OUTH (GAS)   | State, Federal or Fee  |  |
| ocation   | . 1190   | _ Feet From The                                    | FSL Line and1700   | Feet From The  | FEL Line                                       |
| Unit Letter   | 27N  | _ 7W   | NMPM,  | RIO ARRIBA   | County   |
| Section Township  | ·  | Range  |  |  |  |
| I. DESIGNATION OF TRANS   | SPORTER OF O   | IL AND NATUR                                       | RAL GAS Address (Give address to which   | approved copy of this for  | m is to be sent)                               |
| ame of Authorized Transporter of Oil  | OF COROC   |  | OF OF PAGE SOTH CT   | PRET FARMINGT  | TONNM87401                                     |
| MERIDIAN OIL INC.   | head Gas   | or Dry Gas   | Address (Give address to which   | h approved copy of this for  | m is to be sent)                               |
| ame of Authorized Transporter of Casing   |  | 3, 2-1, C-1  |  |  |  |
| EL PASO NATURAL GAS CON   | MPANY S∞c.   | Twp. Rge.  | P.O. BOX 1492, El is gas actually connected?   | When ?   |  |
| well produces oil or liquids,<br>ve location of tanks.  | i  |  |  |  |  |
| this production is commingled with that I   | from any other lease o   | r pool, give commingli                             | ing order number:  |  |  |
| V. COMPLETION DATA  | loit We  |  | New Well Workover  | Deepen   Plug Back   | Same Res'v Diff Res'v                          |
| Designate Type of Completion  |  | ]  | i i  |  |  |
| Date Spudded  | Date Compl. Ready  | to Prod.   | Total Depth  | P.B.T.D.   |  |
| zac Spaniss   | 1  |  | - 89/A - B   | Thatian Dept   | <del></del>                                    |
| levations (DF, RKB, RT, GR, etc.) Name of Producing Formation   |  | Top Oil Gas Pay Tubing Depth                       |  | п  |  |
| ice adding (Ex.)  |  |  | <u> </u>   | Depth Casing   | g Slice  |
| erforations   |  |  |  |  |  |
|   | TUDIN  | C CASING AND                                       | CEMENTING RECORD   | )  |  |
|   | CASING   | TUBING SIZE  | DEPTHEETIN   | OFFIRE   | ACKS CEMENT                                    |
| HOLE SIZE   | CASHEG &   | 100110 0:22  | [U] [S   | <u> </u>   | <b>                                       </b> |
|   |  |  |  |  | [V)  |
|   | l l  |  |  | <del>\UG2 3  990.     </del>   |  |
|   |  |  |  | <del>1171712 U</del> 1330.   |  |
|   |  |  |  |  | 7  |
| V TEST DATA AND REQUE   | ST FOR ALLO  | WABLE .  |  |  | For full 24 hours.)                            |
| V. TEST DATA AND REQUE  | ST FOR ALLO  | WABLE<br>me of load oil and mus                    | Oll  | CON DIV.   | for full 24 hours.)                            |
| V. TEST DATA AND REQUE<br>OIL WELL (Test must be after<br>Date First New Oil Run To Tank  | ST FOR ALLO'S recovery of total volume of Test   | WABLE<br>me of load oil and mus                    | on be equal to or exceed top allo Producing Method (Flow, pur  | mable for his tepph or be<br>mp. DIST eros   |  |
| Date First New Oil Run To Tank  | Date of Test   | WABLE<br>me of load oil and mus                    | Oll  | CON DIV.   |  |
| V. TEST DATA AND REQUE OIL WELL (Test must be after Date First New Oil Run To Tank Length of Test   | ST FOR ALLOV<br>recovery of total volus<br>Date of Test<br>Tubing Pressure   | WABLE me of load oil and mus                       | Producing Method (Flow, pur  | mable for his replie of the map, DUSA etc.   |  |
| Date First New Oil Run To Tank  Length of Test  | Date of Test   | WABLE  | st be equal to or exceed top allo Producing Method (Flow, pur  | mable for his tepph or be<br>mp. DIST eros   |  |
| Date First New Oil Run To Tank  | Tubing Pressure  | WABLE me of load oil and mus                       | Producing Method (Flow, pur  | mable for his replie of the map, DUSA etc.   |  |
| Date First New Oil Run To Tank  Length of Test  Actual Prod. During Test  GAS WELL  | Tubing Pressure Oil - Bbls.  | WABLE me of load oil and mus                       | Producing Method (Flow, pur<br>Casing Pressure   | Choke Size   |  |
| Date First New Oil Run To Tank  Length of Test  Actual Prod. During Test  | Tubing Pressure  | WABLE me of load oil and mus                       | Producing Method (Flow, pur  | Choke Size  Gravity of   | Condensate                                     |
| Date First New Oil Run To Tank  Length of Test  Actual Prod. During Test  GAS WELL  Actual Prod. Test - MCI7D   | Tubing Pressure Oil - Bbls.  |  | Producing Method (Flow, pur<br>Casing Pressure   | Choke Size   | Condensate                                     |
| Date First New Oil Run To Tank  Length of Test  Actual Prod. During Test  GAS WELL  | Tubing Pressure Oil - Bbls.  |  | Producing Method (Flow, put Casing Pressure Water - Bbls.  Bbls. Condensate/MMCF   | Choke Size  Gravity of   | Condensate                                     |
| Date First New Oil Run To Tank  Length of Test  Actual Prod. During Test  GAS WELL  Actual Prod. Test - MCI/D  Testing Method (pitot, back pr.)   | Tubing Pressure Oil - Bbls.  Length of Test Tubing Pressure (  | Shut∙in)   | Producing Method (Flow, pur Casing Pressure Water - Bbls.  Bbls. Condensate/MMCF Casing Pressure (Shut-in)                       | Choke Size   | Condensate                                     |
| Date First New Oil Run To Tank  Length of Test  Actual Prod. During Test  GAS WELL  Actual Prod. Test - MCF/D  Lesting Method (pitot, back pr.)  VI. OPER ATOR CERTIFIE   | Tubing Pressure Oil - Bbls.  Length of Test Tubing Pressure (  | Slut-in)  MPLIANCE                                 | Producing Method (Flow, pur Casing Pressure Water - Bbls.  Bbls. Condensate/MMCF Casing Pressure (Shut-in)                       | Choke Size  Gravity of   | Condensate                                     |
| Date First New Oil Run To Tank  Length of Test  Actual Prod. During Test  GAS WELL  Actual Prod. Test - MCI/D  I eating Method (pitot, back pr.)  VI. OPERATOR CERTIFI  I hereby certify that the rules and rep   | Tubing Pressure Oil - Bbls.  Length of Test Tubing Pressure ( CATE OF CO gulations of the Oil Co and that the information                          | (Sliut-in)  MPLIANCE  onservation n given above    | Producing Method (Flow, pur Casing Pressure Water - Bbls.  Bbls. Condensate/MMCF Casing Pressure (Shut-in)                       | Choke Size  Gravity of  Choke Size  Gravity of  Choke Size  Choke Size  Choke Size  Choke Size | Condensate  Condensate  DIVISION               |
| Date First New Oil Run To Tank  Length of Test  Actual Prod. During Test  GAS WELL  Actual Prod. Test - MCI/D  I eating Method (pitot, back pr.)  VI. OPERATOR CERTIFI  I hereby certify that the rules and rep   | Tubing Pressure Oil - Bbls.  Length of Test Tubing Pressure ( CATE OF CO gulations of the Oil Co and that the information                          | (Sliut-in)  MPLIANCE  onservation n given above    | Casing Pressure  Water - Bbls.  Bbls. Condensate/MMCF  Casing Pressure (Shut-in)   | Choke Size  Gas-MCF  Gravity of  Choke Size  Gravity of  Choke Size  Choke Size  Gas-MCF       | Condensate                                     |
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| Date First New Oil Run To Tank  Length of Test  Actual Prod. During Test  GAS WELL  Actual Prod. Test - MCF/D  Leating Method (pitot, back pr.)  VI. OPERATOR CERTIFI  Thereby certify that the rules and reportions have been complied with an is true and complete to the best of methods.                            | Tubing Pressure Oil - Bbls.  Length of Test Tubing Pressure ( CATE OF CO gulations of the Oil Co nd that the information ny knowledge and beli     | Shut-in)  MPLIANCE onservation in given above icf. | Casing Pressure  Water - Bbls.  Bbls. Condensate/MMCF  Casing Pressure (Shut-in)   | Choke Size  Gas-MCF  Gravity of  Groke Size  Gas-MCF  AUG 2                                    | Condensate  Condensate  DIVISION  3 1990       |
| Date First New Oil Run To Tank  Length of Test  Actual Prod. During Test  GAS WELL  Actual Prod. Test - MCI7D  leating Method (pitot, back pr.)  VI. OPERATOR CERTIFI  I hereby certify that the rules and rep Division have been complied with an is true and complete to the best of m  Signature Uoug W. Whaley, Sta | Tubing Pressure Oil - Bbls.  Length of Test Tubing Pressure ( CATE OF CO gulations of the Oil Co nd that the information ny knowledge and beli     | Shut-in)  MPLIANCE onservation in given above icf. | Casing Pressure  Water - Bbls.  Bbls. Condensate/MMCF  Casing Pressure (Shut-in)  OIL CON  Date Approve                          | Choke Size  Gas-MCF  Gravity of  Groke Size  Gas-MCF  AUG 2                                    | Condensate  Condensate  DIVISION               |
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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.
- 7) All sections of this form must be filled out for antowards on new and recompleted wens.
  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 filled for each pool in multiply completed wells.