

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

OIL CONSERVATION DIVISION

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

WATER PIP# 2806119

Operator Meridian Oil Inc.	Well API No. 30-039-07600
Address PO Box 4289, Farmington, NM 87499	
Reason(s) for Filing (Check proper box) New Well ☒ ☐ Other (Please explain) Recompletion ☒ ☐ Change in Transporter of: Change in Operator ☐ ☐ Oil ☐ Dry Gas ☐ ☐ Casinghead Gas ☐ Condensate ☐	
If change of operator give name and address of previous operator	
OIL CON. DIV DIST. 3	

II. DESCRIPTION OF WELL AND LEASE

Lease Name San Juan 29-7 Unit	Well No. 92	Pool Name, including Formation Undes. Pictured Cliffs Ext	Kind of Lease (State, Federal, or Fee)	Lease No. B-1003740
Location Unit Letter N : 660 Feet From The South Line and 1650 Feet From The West Line Section 16 Township 29 Range 7, NMPM, Rio Arriba County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil Meridian Oil Inc.	or Condensate ☒	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 El Paso Natural Gas Company	or Dry Gas ☐	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 N Sec. 16 Twp. 29 Rgn. 7	Is gas actually connected? When?

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res v	Diff Res v
		X	X			X		
Date Spudded 05-23-52	Date Compl. Ready to Prod. 12-02-93	Total Depth 4674 5607	P.B.T.D. 3402					
Elevations (DF, RKB, RT, GR, etc.) 6347'	Name of Producing Formation Pictured Cliffs	Top Oil/Gas Pay 3135	Tubing Depth 3209					
Perforations 3135-3285'			Depth Casing Shoe					

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
	10 3/4"	198	75 SX
	5 1/2"	4674	225 SX
	2 3/8"	3209	

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 3588	Length of Test 3 hrs	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pump, back pr.) backpressure	Tubing Pressure (Shut-in) 262	Casing Pressure (Shut-in) 422	Choke Size 3/4"

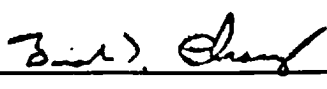
VI. OPERATOR CERTIFICATE OF COMPLIANCE

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
2-5-94
Date
326-9700
Telephone No.

OIL CONSERVATION DIVISION

Date Approved FEB - 8 1994

By 
SUPERVISOR DISTRICT #3
Title

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- All sections of this form must be filled out for allowable on new and recompleted wells.