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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

RECEIVED
JAN 23 1989
OIL CON. DIV.
DIST. 2

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. 20-039-24293
Address P.O. 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

II. DESCRIPTION OF WELL AND LEASE

Lease Name San Juan 29-7 Unit	Well No. 509	Pool Name, including Formation Basin Fruitland Coal	Kind of Lease (State, Federal or Fee)	Lease No. B-10037-58
Location Unit Letter <u>A</u> : <u>795</u> Feet From The <u>North</u> Line and <u>1090</u> Feet From The <u>East</u> Line Section <u>16</u> Township <u>29 North</u> Range <u>7 West</u> , <u>NMPM</u> , <u>Rio Arriba</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒ Meridian Oil Inc.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 4289, Farmington, NM 87499	
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒ El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 4990, Farmington, NM 87499	
If well produces oil or liquids, give location of tanks.	Unit A	Sec. 16
	Twp. 29N	Rge. 7W
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					
Date Spudded 10-15-88	Date Compl. Ready to Prod. 11-10-88	Total Depth 3104'	P.B.T.D.					
Elevations (DF, RKB, RT, GR, etc.) 6262' GL	Name of Producing Formation Basin Frt. Coal	Top Oil/Gas Pay 3013'	Tubing Depth 3066'					
Perforations 3013'-3065'; 2/SPF.			Depth Casing Shoe 3104'					
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12 1/2"	9 5/8"	230'	176 cf					
8 3/4"	7"	2967'	986 cf					
6 1/4"	4 1/2"	3104'	118 cf					
	2 3/8"	3066'						

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	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (piston, back pr.) Back Pressure	Tubing Pressure (Shut-in) SI-306	Casing Pressure (Shut-in) SI-898	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 Affairs
Printed Name
January 12, 1989 (505) 326-9727
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved
By Original Signed by FRANK T. CHAVEZ
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.
- Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- Separate Form C-104 must be filed for each pool in multiply completed wells.