

All distances must be from the outer boundaries of the Section.

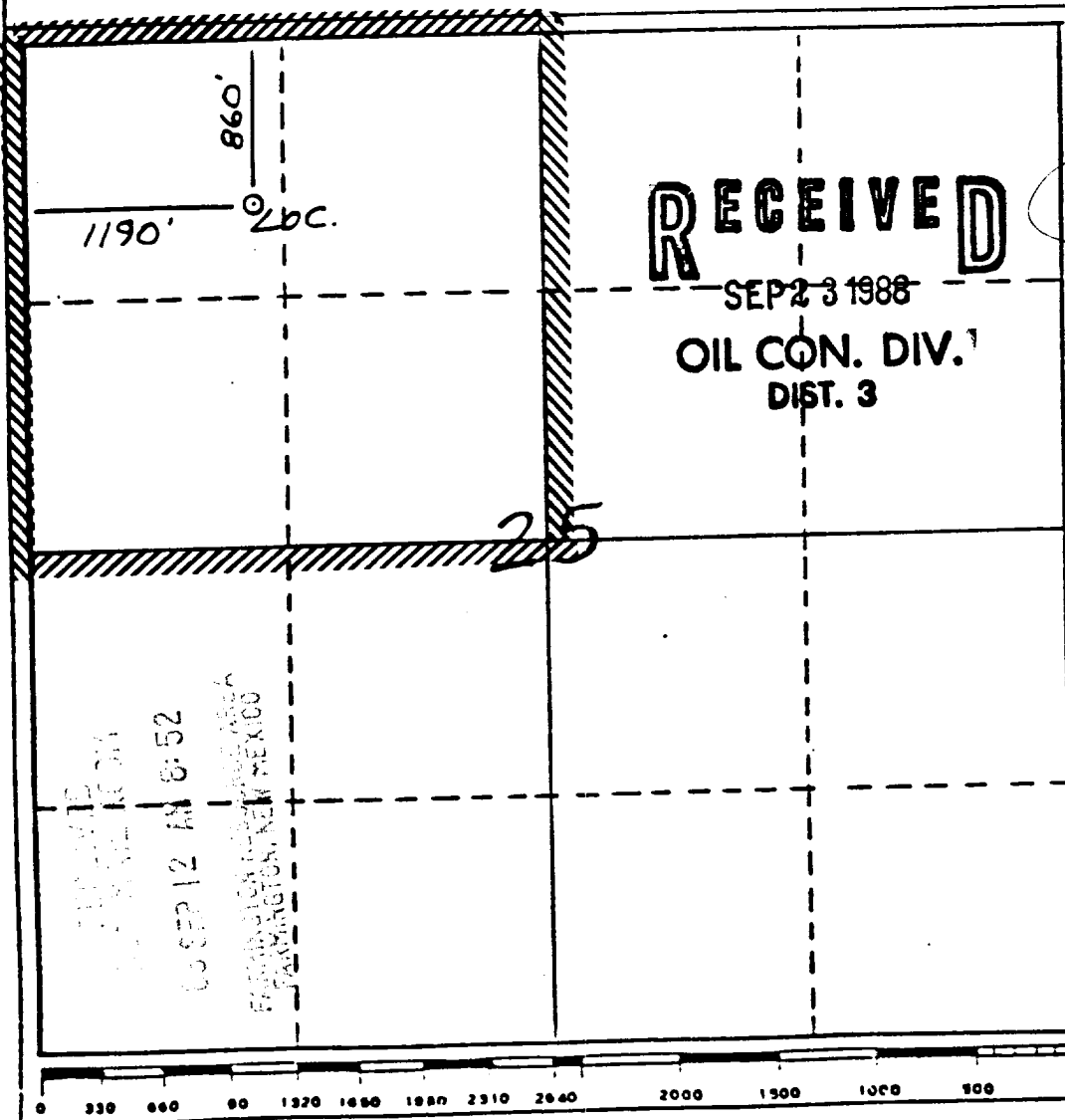
| | | | | |
|---|--|-----------------------------|-----------------------|----------------------------------|
| Operator <i>Meridian Oil Inc.</i> <i>El Paso Natural Gas</i> | | Lease San Juan 29-7 Unit | | Well No. 143 |
| Unit Letter D | Section 25 | Township 29 North | Range 7 West | County (SF-078425) Rio Arriba |
| Actual Footage Location of Wells 860 feet from the North line and 1190 feet from the West line | | | | |
| Ground Level Elev. 6794 " | Producing Formation Pictured Cliffs | | Pool <i>Blanco</i> | Dedicated Acreage: 160 Acres |

1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

☒ Yes ☐ No If answer is "yes," type of consolidation unitization

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.)

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Division



CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

Name
Regulatory Affairs
Position
El Paso Natural Gas Co.
Company
Date

I hereby certify that the location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed
8-9-88
Registered Professional Engineer and/or Land Surveyor
Neale C. Edwards
Certificate No.
6857

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. TYPE OF WORK

DRILL ☒

DEEPEN ☐

PLUG BACK ☐

b. TYPE OF WELL

OIL
WELL ☐

GAS
WELL ☒

OTHER ☐

SINGLE
ZONE ☒

MULTIPLE
ZONE ☐

2. NAME OF OPERATOR

Meridian Oil Inc.
El Paso Natural Gas Company

3. ADDRESS OF OPERATOR

PO Box 4289, Farmington, NM 87499

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)

At ~~MULTIPLE~~ ACRES
860' N, 1190' W

At proposed prod. zone

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*

8 miles from Gobernador, NM

15. DISTANCE FROM PROPOSED*

LOCATION TO NEAREST
PROPERTY OR LEASE LINE, FT. 860'

(Also to nearest drig. unit line, if any)

19. DISTANCE FROM PROPOSED LOCATION*

TO NEAREST WELL, DRILLING, COMPLETED 900'
OR APPLIED FOR, ON THIS LEASE, FT.

16. NO. OF ACRES IN LEASE

Unit 2080

17. NO. OF ACRES ASSIGNED

TO THIS WELL 160.00

20. ROTARY OR CABLE TOOLS

Rotary

21. ELEVATIONS (Show whether DP, RT, GR, etc.)

6794' GL

DRILLING OPERATIONS AUTHORIZED ARE
SUBJECT TO COMPLIANCE WITH ATTACHED

22. APPROX. DATE WORK WILL START*

23.

PROPOSED CASING AND CEMENTING PROGRAM

This action is subject to technical and
procedural review pursuant to 43 CFR 3165.3
and appeal pursuant to 43 CFR 3165.4.

| SIZE OF HOLE | SIZE OF CASING | WEIGHT PER FOOT | SETTING DEPTH | |
|--------------|----------------|-----------------|---------------|----------------------------|
| 12 1/4" | 8 5/8" | 24.0# | 200' | 165 cu.ft. circulated |
| 7 7/8" | 4 1/2" | 10.5# | 3710' | 497 cu.ft. cover Ojo Alamo |

Selectively perforate and sand water fracture the Pictured Cliffs formation.

A 3000 psi WP and 6000 psi test double gate preventer equipped with blind and pipe rams will be used for blow out prevention on this well.

This gas is dedicated.

The NW/4 of Section 25 is dedicated to this well.

RECEIVED
SEP 23 1988
OIL CON. DIV./
DIST. 3

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: If proposal is to deepen or plug back, give data on present productive zone and proposed new productive zone. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowout preventer program, if any.

24. *[Signature]* Drilling Clerk 09-09-88
SIGNED _____ TITLE _____ DATE _____

(This space for Federal or State office use)

PERMIT NO. _____

APPROVAL DATE _____

APPROVED

AS AMENDED

APPROVED BY _____

TITLE _____

DATE _____

CONDITIONS OF APPROVAL, IF ANY:

SEP 20 1988

*See Instructions On Reverse Side

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any Department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

BLM ROW

T 29N, R 6W

Sec 30: S2SW

NESW

N2SE

29: NESW

SE NW

2900'

2600'

1500'

1500'

300'

BLM Row

GOVERNADOR

Map 2

Fee Lands

32

T 29N

R 6W

R 7W

36

35

San Juan

29-7 unit

143

25

Canyon

Rafael

26

CANYON

23

San

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

| | |
|------------------------|-----|
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| OPERATOR | GAS |
| PROMOTION OFFICE | |

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

OIL CON. DIV.
DIST. 3

I. Operator
El Paso Natural Gas Company Meridian Oil

Address
PO Box 4289, Farmington, NM 87499

Reason(s) for filing (Check proper box)
☒ New Well
☐ Recompletion
☐ Change in Ownership

Change in Transporter of:
☐ Oil
☐ Casinghead Gas
☐ Dry Gas
☐ Condensate

Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|---|------------------------|--|---|-------------------------------|
| Lease Name <u>San Juan 29-7 Unit</u> | Well No. <u>143</u> | Pool Name, including Formation <u>Blanco Pic.Cliffs</u> | Kind of Lease State (Federal) or Fee | Lease No. <u>SF-078425</u> |
| Location Unit Letter <u>D</u> ; <u>860</u> Feet From The <u>North</u> Line and <u>1190</u> Feet From The <u>West</u> Line of Section <u>25</u> Township <u>29N</u> Range <u>7W</u> , NMPM, <u>Rio Arriba</u> County | | | | |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| | |
|--|---|
| Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> <u>Meridian Oil Inc.</u> | Address (Give address to which approved copy of this form is to be sent) <u>PO Box 4289, Farmington, NM 87499</u> |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> <u>El Paso Natural Gas Company</u> | Address (Give address to which approved copy of this form is to be sent) <u>PO Box 4990, Farmington, NM 87499</u> |
| If well produces oil or liquids, give location of tanks. | Unit <u>D</u> Sec. <u>25</u> Twp. <u>29N</u> Rge. <u>7W</u> Is gas actually connected? <input type="checkbox"/> when |

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.



Regulatory Affairs

November 22, 1988

(Date)

OIL CONSERVATION DIVISION

APPROVED DEC 08 1988, 19

BY Original Signed by FRANK T. CHAVEZ

TITLE SUPERVISOR DISTRICT 3

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

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. 11-05-88 | | Total Depth 3686' | | P.B.T.D. 3664 | | | | |
| Elevations (DF, RKB, RT, GR, etc.) 6794' GL | Name of Producing Formation Pictured Cliffs | | Top Oil/Gas Pay 3628' | | Tubing Depth 3656' | | | | |
| Perforations 3628', 3630', 3634', 3638', 3640', 3642', 3644', 3646', 3648', 3650', 3652', 3660', 3686' | | | | | Depth Casing Shoe 3686' | | | | |

TUBING, CASING, AND CEMENTING RECORD

| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT |
|-----------|----------------------|-----------|------------------------|
| 12 1/4" | 8 5/8" | 138' | 180 cu.ft. |
| 7 7/8" | 4 1/2" | 3686' | 1224 cu.ft. |
| | 2 3/8" | 3656 | 1274 |

V. TEST DATA AND REQUEST FOR ALLOWABLE (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 Tanks | 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 1845 | Length of Test 3 hrs | Bbls. Condensate/MMCF 0 | Gravity of Condensate -- |
| Testing Method (pilot, back pr.) backpressure | Tubing Pressure (Shut-in) 1059 | Casing Pressure (Shut-in) 1070 | Choke Size 3/4 |