

Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

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

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

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator Meridian Oil Inc.		Well API No. 30-039-24907
Address PO Box 4289, Farmington, NM 87499		
Reason(s) for Filing (Check proper box) ☐ Other (Please explain)		
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 30-6 Unit	Well No. 500	Pool Name, including Formation Basin Fruitland Coal	Kind of Lease State/Federal/for Fee	Lease No. NM-012709
Location Unit Letter K : 1965 Feet From The South Line and 790 Feet From The West Line Section 31 Township 30 Range 7, NMPM, Rio Arriba County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒	Address (Give address to which approved copy of this form is to be sent) Meridian Oil Inc., PO Box 4289, Farmington, NM 87499					
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent) Meridian Oil Inc., PO Box 4289, Farmington, NM 87499					
If well produces oil or liquids, give location of tanks.	Unit K	Sec. 31	Twp. 30	Rge. 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 Per v
		X	X					
Date Spudded 10-08-90	Date Compl. Ready to Prod. 01-12-91	Total Depth 2774'		P.B.T.D.				
Elevations (DF, RKB, RT, GR, etc.) 5996'	Name of Producing Formation Fruitland Coal	Top Oil/Gas Pay 2641'		Tubing Depth 2744'				
Performances 2641-2771' (Predrilled liner)		Depth Casing Shoe						
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT				
12 1/4"	9 5/8"	226'		189 cu.ft.				
8 3/4"	7"	2632'		1273 cu.ft.				
6 1/4"	5 1/2"	2773'		did not cmt				
	2 3/8"	2744'						

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	
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

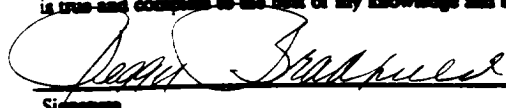
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GAS WELL		Actual Prod. Test - MCF/D		Length of Test	Bbls. Condensate/MCF	Gravity of Oil
Testing Method (press. back pr.) backpressure		Tubing Pressure (Shut-in) SI 663		Casing Pressure (Shut-in) SI 662	Choke Size	

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
Printed Name
2-4-91
Date
Reg. Affairs
Title
326-9700
Telephone No.

OIL CONSERVATION DIVISION

Date Approved AUG 20 1991
By ORIGINAL SIGNED BY ERNIE BIUSCH
Title DEPUTY OIL & GAS INSPECTOR, DIST. #1

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.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.