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

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

DISTRICT III

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

OW Rio Brazos Rd., Aziec, NM 87410	REQU					AUTHORIZ	\S	,			
perator ANOCO PRODUCTION COMPANY					Well API No. 300450973400						
Address P.O. BOX 800, DENVER,	COLORAI	00 8020	1								
Reason(s) for Filing (Check proper box) New Well Recompletion Change in Operator I change of operator give name and address of previous operator	Oil Casinghea	Change in	Dry Ga	. 📮	Ouh	es (Pleas e e xpl	ain)				
I. DESCRIPTION OF WELL	AND LE	ASE									
ease Name Well No. Pool Name, Include								of Lease Federal or Fe		ease No.	
Unit LetterG	_ :	1650	Fect Fro	om The	FNL Lin	e and16	550 Fe	ei From The	FEL	Line	
Section 08 Towns	hip 301	Į .	Range	12W	, <u>N</u>	мрм,	SAN	JUAN		County	
II. DESIGNATION OF TRA		R OF OI or Condens	ate.	D <u>NATU</u>	Address (Gir	ve address to w					
MERIDIAN OIL INC.					3535 EAST 30TH STREET FARMINGTON, CO 87401 Address (Give address to which approved copy of this form is to be sent)						
EL PASO NATURAL GAS—C If well produces oil or liquids, give location of tanks.	roduces oil or liquids, Unit Sec. Twp. Rge. is gas actually connect				OX 1492, y connected?	12, EL PASO, TX 79978					
f this production is commingted with the V. COMPLETION DATA	at from any ou	_,							le n t	big p. s.	
Designate Type of Completion	n - (X)	Oil Well		Gas Well	İ	Workover	Deepen	ring back	Same Res'v	Diff Res'v	
Date Spudded	Date Com	Date Compl. Ready to Prod.				Total Depth			P.B.T.D.		
Revations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas	Pay		Tubing De	lubing Depth		
Perforations					1			Depth Casing Shoe			
				ING AND CEMENTING REC							
HOLE SIZE	CA	CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT		
V. TEST DATA AND REQUI	EST FOR	ALLOWA	BLE								
OIL WELL (fest must be after recovery of total volume of load oil and must Date First New Oil Run To Yank Date of Test					be equal to or exceed top allowable for this depth or be for full 24 hours.) Producing Method (Flow, pump, gas lyft, etc.)						
Length of Test	Tubing Pr	Tubing Pressure			Casing Pressure			ECEIVEM			
Actual Prod. During Test	Oil - Bbls	Oil - Bbls.			Water - Bbls.			JUL 2 1990			
GAS WELL		_			1			U CO	N. DI\	/	
Actual Prod. Test - MCF/D	Length of	Length of Test				Bbls. Condensate/MMCF			DIST. 3		
Festing Method (pitot, back pr.)	Tubing Pr	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size		
VI. OPERATOR CERTIFI I hereby certify that the rules and repolivision have been complied with an is true and complete to the best of in	gulations of the	Oil Conserversation give	vation			OIL COI	Jl d) _{1.} 2.19		NC	
Sugnature Doug W. Whaley, Staff Admin. Supervisor Finited Name June 25, 1990 303-830-4280					By _		SUPERVI		STRICT #	3	
June 25, 1990 Date			bpoue y								

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.
- 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 filed for each pool in multiply completed wells.