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

State of New Mexico /
Energy, Minerais and Natural Resources Department

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

Well API No.

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Meridian Oil Inc.	•						<u> </u>	casy. I
Address PO Box 4289, Farmi	ngton. NM	87499					· - · · · · · · · · · · · · · · · · · ·	
Reason(s) for Filing (Check proper box)			Other	t (Please expia	ur)			
New Well	Change	in Transporter of:		•	·			
Recompletion	Oil [Dry Gas						
Change in Operator	Casinghead Gas	Condensate						
If change or operator give name and address or previous operator								
IL DESCRIPTION OF WELL	AND LEASE							
Lease Name	Well N	o. Pool Name, include	ing Formation	4 Cool		r Lease Federal or Fee	15E-H	79811
San Juan 32-5 Unit	105	Basin F	ruitiano	- Coar	3000,	Legistal Ot Leg	52-5	77011
Location B	1060		North		780		East	
Unit Letter	:	Feet From The	Line			et From The _	· -	Line
Section 25 Township	32N	Range 5 W	, NIM	PM, Ri	o Arri	.ba 		County
m pegchation of than	CRODTER OF	OTE AND NATED	DAT CAS					
III. DESIGNATION OF TRAN Name of Authorized Transporter of Oil	or Com			address to wh	ich approved	copy of this fo	erm is to be se	ni)
Meridian Oil Inc.			<u> </u>			ngton, NM 87499		
Name of Authorized Transporter of Casing		or Dry Gas 🔀	Address (Give	address to wh	En remark	copy of this fo	orm is to be se	401
Northwest Pipeline	 		3539 E.30th, Farmin				NII O /	401
If well produces oil or liquids, give location of tanks.	Unnit Sec. B 25	, , , -	12 Res ections	compara:		•		
If this production is commingled with that i	 		ing order numb	er:				
IV. COMPLETION DATA	~ X /	<u>za Szijaja a za </u>	- , ,			1 -	,	
Designate Type of Completion	- (XO) i	/eii Gas Weti X	New Weil	Workover	Deepen	Plug Back	Same Res'v	Diff Resiv
Date Spudded	Date Compt. Ready	l	Total Depth		<u>. </u>	I i P.B.T.D.	1	
06-14-89	07-25-8		3156'					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing	Formation	Top Oil/Gas Pay			Tubing Depth		
6396 GL	Fruitlar	nd Coal	3060 '			Depth Casing Shoe		
3060-82' w/3 spf;	3130-411	w/l enf				Depui Casin	g save	
3060-82 W/3 SDI;	TUBIN	G. CASING AND	CEMENTIN	NG RECOR	D			
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT		
12 1/4"	9 5/8"		492'		421 cu.ft. 913 cu.ft.			
8 3/4"	7"		3020' 3155'		74 cu.ft.			
6 1/4"	2 3/8"			.07 '		, , , ,		
V. TEST DATA AND REQUES	T FOR ALLO							
	,	me of load oil and mus					for full 24 hou	F3.)
Date First New Oil Run To Tank	Date of Test		Producing Me	ethod (Flow, pu	emp, gas lyt, i	ne.)		
Length of Test	Tubing Pressure		Casing Pressure			Choke Size		
Actual Prod. During Test	Oil - Bbls.		Water - Bbis.			Gas- MCF		
			! ,		· ·	<u> </u>		mr
GAS WELL						Gravity of C		
Actual Prod. Test - MCF/D	Langth of Test		Bbis. Conden	MINIOT		CHEVITY OF	-Officer Parts	
Testing Method (pilot, back pr.)	Tubing Pressure (S	hut-in)	Casing Press			Choke Size		
backpressure	SI 1029		SI l	L050			·	
VI. OPERATOR CERTIFIC	ATE OF CON	IPLIANCE		DIL CON	ICEDV	ATION	חואופונ	SNI
I hereby certify that the rules and regul	ntions of the Oil Con	Mervation			49EH V	AIION	DIVISIO	J14
Division have been complied with and is true and complete to the best of my	that the information Chowledge and belief	given soovs [.	Dot-	A	I		୍ରବ	
$\langle \ \rangle \langle \ \rangle$	Date	Date Approved						
Jeggy Stad	full		By_	Origin	al Signed b	y Frank T.	CHAVEZ	
Signature Peggy Bradfield	D _C	q.Affairs	By -		845%	201. See .	,	-
Printed Name	326-9700			SUPERFERENCE DE LA TEMPO				
9-2-89					·			
Date	1	l'elephone No.	1			<u> </u>	-	
			- 4464					

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.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.