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

DISTRICT II P.O. Drawer DD, Artesia, NM 88210 State of New Mexico
Energy, Minerals and Natural Resources Department

## OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION 23.3

I.	7	OTRA	NSP	ORT OIL	AND NA	TURAL	GAS	;						
Operator Meridian Oil Inc	Well APINO. 30-045-27133						3							
Address PO Box 4289, Far	mingto:	n, NM	87	7499					<del></del>					
Reason(s) for Filing (Check proper box)					Oth	et (Please e	xplain,	)		<del></del>				
New Well		Change in	Transpo	orter of:	_	•								
Recompletion	Oil		Dry Ga	<b>.</b>										
Change in Operator	Casinghead	l Gas 🔲	Conde											
If change of operator give name				-										
and address of previous operator				· · · ·										
IL DESCRIPTION OF WELL	AND LEA				. <u> </u>			1						
Allison Unit		Mell No.	Pool N	ame lackd asin f	ruitla:	nd Co	al	I .	of Lease Federal or Fe	1 -	ease No.			
Location			1					1/	<del>,</del>		503-8			
Unit LetterJ	_:17	75	Feet Fr	om The _S	outh Lin	e and	1	450 Fe	et From The	East.	Line			
Section 16 Townshi	ip 32N		<b>D</b>	7W										
Section 16 Townshi	<b>p</b> 32N	<del></del>	Range	7 (1)	, N	МРМ,	Sa.	n Jua	11	<del></del>	County			
III. DESIGNATION OF TRAN	SPORTE			D NATU										
Name of Authorized Transporter of Oil Meridian Oil Inc		or Conden	mie	X						form is to be se	•			
Name of Authorized Transporter of Casin								PO Box 4289, Farmington, NM 8749  Address (Give address to which approved copy of this form is to be sent)						
Meridian Oil Inc	•		or bry cas [A]		PO Box 4289, Farmin									
If well produces oil or liquids,		Sec.	Twp.	Rge.	is gas actuali			When						
give location of tanks.	jJ	16	32N	7W										
If this production is commingled with that	from any other	er lease or p	pool, giv	e commingi	ing order num	ber:								
IV. COMPLETION DATA		<del>,</del>			·									
Designate Type of Completion	- (X)	Oil Well	(	Gas Well	New Well	Workove	r	Deepen	Plug Back	Same Res'v	Diff Res'v			
Date Spudded		Ready to	Prod	X	X Total Depth	<u> </u>			P.B.T.D.	l				
12-02-88	1	Date Compt. Ready to Prod. 01-11-89				8 '			1.5.1.5.					
Elevations (DF, RKB, RT, GR, etc.)		Name of Producing Formation				Top Oil/Gas Pay				Tubing Depth				
6470 <b>'</b> GL	Fruitland Coal				3029 <b>'</b>				3143'					
Perforations					Depth Casing Shoe									
<u>3029-71', 3113-5</u>					315	3152'								
					CEMENTI									
12 1/4"	CASING & TUBING SIZE				232'				SACKS CEMENT					
8 3/4"		9 5/8"						-	177 cu.ft. 971 cu.ft.					
6 1/4"	+					3020'				<del></del>				
0 1/4	5 1/2"liner 3152' 2 3/8" 3143'													
V. TEST DATA AND REQUE	ST FOR A	ĽĽŎW A	BLE	<del></del>	<del></del>									
OIL WELL (Test must be after t	recovery of tot	al volume i	of load o	oil and must						for full 24 hou	rs.)			
Date First New Oil Run To Tank	Date of Tes	t			Producing Me	ethod (Flow	, pump	, gas lift, e	tc.)					
Length of Test	Tubing Pres	The state of the s			Casing Pressure				Choke Size					
Longer or 10m	Bute			Casing Freesure										
Actual Prod. During Test	Oil - Bbis.	l - Bbis.				Water - Bbis.				Gas- MCF				
				_										
GAS WELL														
Actual Prod. Test - MCF/D	Length of Test			Bbis. Condensate/MMCF				Gravity of Condensate						
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in) 595				1	Casing Pressure (Shut-in) 971				Choke Size				
backpressure						J / L								
VI. OPERATOR CERTIFIC				NCE	$\parallel$		NS	SERV	ATION	DIVISIO	NC			
I hereby certify that the rules and regul Division have been complied with and					11						<b>71 Y</b>			
is true and complete to the best of my	Date Approved MAR 0-6 1989													
		4			Dale	Abbio	vea		11 U J	1000				
Oliga Man	Original Signed by FRANK T. CHAVEZ													
Peggy Bradfield,	∥ By_		-		-		<del> </del>							
Printed Name	Title SUPERVISOR DISTRICT # 5													
March 3, 1989	326	<del>-</del> 9727		<del></del>	II HILE									
Date		Tele	phone N	io.	<u> </u>									

## 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.

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OIL CONSERVATION DIVISION P.O. Box 2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

MERIDIAN OIL	INC.										
Address PO Box 4289, Fa		ton, 1	NM	87499							
Reason(s) for Filing (Check proper box)					Oth	et (Please expl	ain)				
New Well  Recompletion	Oil	Change in	n Transp Dry G								
Change in Operator	Casinghe	ad Gas	Conde	_ =							
If change or operator give name and address of previous operator			<u>-</u>								
II. DESCRIPTION OF WELI	ANDIE	ASE									
Lease Name		Well No.   Pool Name, includ				ing Formstron Kir				Lease No.	
Allison Uni	t	129	Ва	asın Fr	uitland	Coal	State, Federal or Fe		E-503-8		
Location Unit Letter J		1775		. <b></b> Sa	outh	and1450	0 -		Fact		
Unit Letter	:	1113	_ Feet F	rom the _O	Julii Lin	<b>884</b> - 十年の	<u> </u>	et From The	East	Line	
Section 16 Towns	11p 32N		Range	0.7W	, Nī	MPM,	San J	uan		County	
III. DESIGNATION OF TRA	NSPORTE	ER OF O	IL AN	D NATU	RAL GAS						
Name of Authorized Transporter of Oil		or Conde	name	X	1	e address to wi				•	
Meridian Oil Ir								ington, NM 87499  Copy of this form is to be sent)			
Northwest Pipel		<del></del>	or Diy		1	E. 30t				•	
If well produces oil or liquids,	Unit	Sec. 16	Twp. 321		is gas actuaii		When			<u> </u>	
If this production is commingled with the		Щ	J		ing order sum					<del></del>	
IV. COMPLETION DATA			μω <b>ι, g</b> ,	ve comming.							
Designate Type of Completion	1 - (X)	Oil Wel	1	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Spudded		ipi. Ready u	o Prod.		Total Depth		<u> </u>	P.B.T.D.	<u> </u>		
Elevations (DF, RKB, RT, GR, etc.)	Name of F	Producing F	omation		Top Oil/Gas	Pav	-	Tubing Depth			
Lievalous (Dr., Red., Rr., OR, Ele.)	i value of 1	. IOGEORIES I	011111101	•				I morting to-chart			
Perforations								Depth Casing Shoe			
		TUBING.	. CASI	NG AND	CEMENTI	NG RECOR	D	· · · · · · · · · · · · · · · · · · ·			
HOLE SIZE	CA	ISING & TI	UBING	SIZE		DEPTH SET		SACKS CEMENT			
				<u> </u>				•			
V. TEST DATA AND REQUE	ST FOR	ALLOW	ADIE	<del> </del>	!						
OIL WELL Test must be after					be equal to or	exceed top allo	wable for thi	s depth or be	for full 24 hou	rs.)	
Date First New Oil Run To Tank	Date of Te	est		-	Producing Me	thod (Flow, pu	emp, gas lift, e	ttc.)			
Length of Test	Tubing Pr				Casing Press	ire		Those Size			
	1 doing 11	Casalic						M			
Actual Prod. During Test	Oil - Bbis	•			Water - Bbis.			JUN 0 2 1989			
GAS WELL	· <del></del>				<u> </u>					DIV	
Actual Prod. Test - MCF/D	Length of	Test			Bbis. Conden	mie/MMCF		Gravity of Condensate			
Paris Maked (San Late)	Tubing De	(Chu	t-in)		Casing Press	um (Shut-in)	<del></del>	Choke Size			
testing Mindred (pulse, back pr.)	ng Mathod (pitot, back pr.)  Tubing Pressure (Shut-in)					Casing Pressure (Shut-in) Choke Size					
VI. OPERATOR CERTIFIC	CATE OF	F COMI	PLIA	NCE		NI COA	ICEDY	ATION		331	
I hereby certify that the rules and reg Division have been complied with an				_		OIL CON	OERV.	AHON	DIVIDIC	JN .	
is true and combine to see pag of mi		•	TEL ADOV	•	Date	Approve	., .	JUN 02	1989		
1. 3	נ קנה י	<del>-</del>			Dale			4	_		
Signature Signature		CA	<del></del>		By_		منده	<u>), el</u>	und		
Peggy Bradfield	Reg	ulato		ffairs	13		SUPERV	ISION DI	ISTRICT i	# 3	
Printed Name 06-01-89	32	6-972	Title 7		Title		-				

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