banit 5 Copies propriate District Office DISTRICT I P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerais 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

DISTRICT II P.O. Drawer DD, Artesia, NM \$8210

REQUEST FOR ALLOWABLE AND AUTHORIZATION

	T	OTRA	NSP	ORT OIL	AND NA	TURA	L GA		Nr. XI.				
perator Meridian Oil Inc.	onth la	ind a	Roi	nalta				Weil A	Pl No.				
ddress P. O. Box 4289, Farmir			-) 									
esson(s) for Filing (Check proper box)	.,,.,				Oth	t (Pleas	e emia	in)					
ew Well	,	Change in	Transc	orter of:		-,	- -	,					
			•	67									
ecompletion \Box	Oil	_	Dry G					•					
hange in Operator 🔲	Casinghead	Gas	Conde										
change of operator give name													
d address of previous operator													
DESCRIPTION OF WELL	ANDIEA	CE.											
			De et 1	Variation of the state of the s	Ei			Vind a	(Lease	I a	ase No.		
ease Name	145 153					—				State, Federal or Fee SF-078040A			
Lawson		1R	DIO	inco mes	averue					35-07	004UA		
ocation						_							
Unit Letter N	. 13	l50	East I	The SO	uth Lin	. and 1	670	· Fe	et From The	West	Line		
-													
Section 12 Township	311	J	Range	. 11	W N	иРМ,	Sar	Juan			County		
Second 12 TOWEREN	, 01.	•	NAUG	<u> </u>	, , , , , ,	71 EVI,					<u>county</u>		
I. DESIGNATION OF TRAN				ND NATU									
ams of Authorized Transporter of Oil		or Condex	LEDIC	⊦ X 	Address (Giv	e addres	s to wi	ich approved	copy of this fo	om is to be se	nt)		
Meridian Oil Inc.					P. O. E	Sox 4	289,	<u>Farmin</u>	gton, N	<u>4 87499</u>			
ame of Authorized Transporter of Casing	ghead Gas		or Dr	y Gas 💢	Address (Giv	e addres	s to wi	ich approved	copy of this fo	orm is to be se	nt)		
Gas Company of New Mex	_	_			POF	Rox 1	ggg.	Rloomf	ield N	M 87413	}		
		Con	17	l Par	Is gas actuali			When		1 07 710			
well produces oil or liquids, re location of tanks.	Unit	Sec.	Twp.	Rge.	te San actuals	COMME	ABU!	i witen					
4 ROBOR OF GAME.		<u></u>		i			,						
his production is commingled with that I	from any othe	er lease or	pool, g	ive commingi	ing order num	er:							
. COMPLETION DATA								_					
		Oil Well		Gas Well	New Well	Work	over	Deepen	Plug Back	Same Res'v	Diff Res'v		
Designate Type of Completion	- (X)	i	i		i	İ		İ		Î	İ		
ate Spudded	Date Comp	i Ready to	Fad		Total Depth			L	P.B.T.D.	L			
me Sharaen	Des Comp	L. ROMLY W	J 1 .Ou.						1.5.1.5.				
	1				Top Oil/Con	0							
evations (DF, RKB, RT, GR, etc.)	Name of Pr	oducing F	omnatio	XC	Top Oil/Gas	ray			Tubing Dep	th i			
erforations	•								Depth Casin	g Shoe			
		TIBBIC	CAS	TNG AND	CEMENTI	NC DE	COP	D					
					CEMENTING RECORD				CLOVE OF LIFT				
HOLE SIZE	CAS	SING & TI	SIZE	DEPTH SET				SACKS CEMENT					
									1				
	•												
	1			 	1								
. TEST DATA AND REQUES	T FOD A	LLOW	A DI 1	<u> </u>	<u> </u>				<u>.</u>				
							11	bla fam shi	a dameh an ba	6 6-11 24 hou	1		
IL WELL (Test must be after t	ecovery of to	tal volume	of load	d ou and must						CV JULE 24 NOW			
ate First New Oil Run To Tank	Date of Tes	t			Producing M	ethod (F	low, pi	emp, gas lift, e	ic.)				
ength of Test	Tubing Pre	ESLITE			Casing Tel	nd .			Size				
						(Tex	ે જ	्रा प्राप्त					
count Prod. During Test	Oil - Bbls.				Water - Hay				GALMCF				
CUM Frod. During Test	Ou - Bois.				ा ध्यक	้กถ	79	6 19 91 .					
						UU	4	0 100 s.	<u> </u>				
GAS WELL					22	w. 8 8	پەر بىلى	A : 1746	1				
consi Prod. Test - MCF/D	Length of	Cest			Bbls. Condi	M	Ker		Gravity of	Condensate			
Here I was a superior							nŝ	T 3	'				
		- //			Casing Press	(Sha			Choke Size				
sting Method (pitot, back pr.)	Tubing Pre	earie (200	K-ID)		Canage ries	me (200	L-12)		CIONE 322				
L OPERATOR CERTIFIC	'ATE OE		DT TA	NCE									
					11 (OIL (ISERV	ATION	DIVISIO	NC		
I hereby certify that the rules and regu					11	_ · `							
Division have been complied with and			ven abc	ove 9vc	11			IJ	CT 1 & 1	qq1			
is true and complete to the best of my	PROMISORS ST	na Dellet.			Date	App	rove	id	'				
Land A	/_ l.		, , ,	,		ياما			Λ				
JULIL T	$\gamma U J U$	XX.	VV	•	_			Bil	s di	/			
Signature	1 5	/	- /		By_			ممده	<u>, m</u>	<u></u>			
Leslie_Kahwajy	Pro	duct	A Vao	nalyst				SHEEDY	פות מטפו	TRICT #	3		
								OULEUA	JUN DIS	INIOI 8	•		
Printed Name 10/11/91	505	-326-	9700		Title								
			ephone		11								
Date		16	أفلالاب	TU.	11								

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.