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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

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

I. Operator Meridian Oil Inc. Well API No. 30-025-31900

Address P.O. Box 51810, Midland, TX 79710-1810

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 THIS WELL HAS BEEN PLACED IN THE POOL DESIGNATED BELOW. IF YOU DO NOT CONCUR NOTIFY THIS OFFICE.

II. DESCRIPTION OF WELL AND LEASE

|  |               |   |  |                     |
|--|---------------|---|--|---------------------|
| Lease Name<br>Hat Mesa State   | Well No.<br>5 | Pool Name, including Formation<br>Hat Mesa Delaware | Kind of Lease<br>State Federal or Fee<br>State | Lease No.<br>V-1618 |
| Location<br>Unit Letter F : 1965 Feet From The N Line and 2310 Feet From The W Line<br>Section 32 Township 20S Range 33E, NMPM, Lea County |               |   |  |                     |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

|   |  |            |            |            |                                   |                  |
|---|--|------------|------------|------------|-----------------------------------|------------------|
| Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/><br>KOCH SERVICES         | Address (Give address to which approved copy of this form is to be sent) |            |            |            |                                   |                  |
| Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/><br>GPM GAS CORP. | Address (Give address to which approved copy of this form is to be sent) |            |            |            |                                   |                  |
| If well produces oil or liquids, give location of tanks.  | Unit<br>K  | Sec.<br>32 | Twp.<br>20 | Rge.<br>33 | Is gas actually connected?<br>YES | When?<br>5/24/93 |

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 <input checked="" type="checkbox"/> | Gas Well | New Well <input checked="" type="checkbox"/> | Workover | Deepen                       | Plug Back | Same Res'v | Diff Res'v |
| Date Spudded<br>3-5-93                        | Date Compl. Ready to Prod.<br>5-7-93         |          | Total Depth<br>8370                          |          | P.B.T.D.<br>8328             |           |            |            |
| Elevations (DF, RKB, RT, GR, etc.)<br>3627 GR | Name of Producing Formation<br>Delaware      |          | Top Oil/Gas Pay<br>6802                      |          | Tubing Depth<br>2.875 @ 6730 |           |            |            |
| Perforations<br>6802' - 7134' Delaware        |  |          |  |          | Depth Casing Shoe<br>8370'   |           |            |            |
| TUBING, CASING AND CEMENTING RECORD           |  |          |  |          |                              |           |            |            |
| HOLE SIZE                                     | CASING & TUBING SIZE                         |          | DEPTH SET                                    |          | SACKS CEMENT                 |           |            |            |
| 17 1/2"                                       | 13 3/8"                                      |          | 415'   |          | 425                          |           |            |            |
| 12 1/4"                                       | 8 5/8"                                       |          | 3305'  |          | 1475                         |           |            |            |
| 7 7/8"  | 5 1/2"                                       |          | 8358'  |          | 1125                         |           |            |            |

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<br>5/7/93 | Date of Test<br>5/24/93 | Producing Method (Flow, pump, gas lift, etc.)<br>PUMPING |                 |
| Length of Test<br>24 HRS                 | Tubing Pressure         | Casing Pressure  | Choke Size      |
| Actual Prod. During Test                 | Oil - Bbls.<br>140      | Water - Bbls.<br>63                                      | Gas- MCF<br>175 |

GAS WELL

|                                  |                           |                           |                       |
|----------------------------------|---------------------------|---------------------------|-----------------------|
| Actual Prod. Test - MCF/D        | Length of Test            | Bbls. Condensate/MMCF     | Gravity of Condensate |
| Testing Method (pilot, back pr.) | Tubing Pressure (Shut-in) | Casing Pressure (Shut-in) | 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   
Donna Williams Production Assistant  
Printed Name Title  
5-11-93 915-688-6943  
Date Telephone No.

OIL CONSERVATION DIVISION  
MAY 28 1993

Date Approved  
By ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR  
Title

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 multiple completed wells.