

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

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

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

State of New Mexico  
Energy, Minerals and Natural Resources Department

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

Operator Southland Royalty Co		Well API No. 30-045- 07363
Address PO Box 4289, Farmington, NM 87499		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input type="checkbox"/>	Change in Transporter of:	
Recompletion <input checked="" type="checkbox"/>	Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name Newman A	Well No. 7	Pool Name, including Formation Basin Fruitland Coal	Kind of Lease State/Federal Fee	Lease No. SF-065546
Location Unit Letter B : 990 Feet From The North Line and 1650 Feet From The East Line Section 19 Township 28 Range 10, NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Meridian Oil Inc. 2396910	Address (Give address to which approved copy of this form is to be sent) PO Box 4289, Farmington, NM 87499	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Sunterra Gas Gathering 2396930	Address (Give address to which approved copy of this form is to be sent) PO Box 1899, Bloomfield, NM 87413	
If well produces oil or liquids, give location of tanks.	Unit B	Sec. 19
	Twp. 28	Rgn. 10
Is gas actually connected? When ?		

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
		X				X		X
Date Spudded 1-31-52	Date Compl. Ready to Prod. 11-7-90		Total Depth 2067' 2044'		P.B.T.D. 1965'			
Elevations (DF, RKB, RT, GR, etc.) 5932'DF	Name of Producing Formation Fruitland Coal		Top Oil/Gas Pay 1780'		Tubing Depth 1940'			
Perforations 1780-93', 1840-52', 1950-63'					Depth Casing Shoe			

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
	8 5/8"	125'	75 sx
	5 1/2"	1967'	6578 sx
	1 1/2"	1940'	

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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls. NOV 29 1990	Gas - MCF


OIL CON. DIV.,

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF/D	Gravity of Condensate
Testing Method (press. back pr.) backpressure	Tubing Pressure (Shut-in) SI 169	Casing Pressure (Shut-in) SI 168	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  
Perry Bradfield Reg. Affairs  
Printed Name  
11-27-90 Title  
326-9700  
Date  
Telephone No.

OIL CONSERVATION DIVISION

Date Approved FEB 15 1991

By Original Signed by CHARLES GRULSON

Title DEPUTY OIL & GAS INSPECTOR, DIST. #3

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.



District I  
PO Box 1980, Hobbs, NM 88241-1980

District II  
P O Drawer DD, Artesia, NM 88211-0719

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

District IV  
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico  
Energy, Minerals, & Natural Resources Department

Form C-104  
Revised February 21, 1994  
Instructions on back  
Submit to Appropriate District Office  
5 Copies

OIL CONSERVATION DIVISION  
PO Box 2088  
Santa Fe, NM 87504-2088

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

Operator Name and Address  MERIDIAN OIL, INC. PO Box 4289 Farmington, NM 87499  DHC-1009		OGRID Number  14538
		Reason for Filing Code  CH/01-01-96
API Number 30-045-7363	Pool Name BASIN (FRUITLAND COAL)✓	Pool Code 71629 ✓
Property Code 10557	Property Name NEWMAN A	Well Number #7

II. Surface Location

UI or lot no. B ✓	Section 19 ✓	Township 028N ✓	Range 010W ✓	Lot.Idn	Feet from the 990 ✓	North/South Line N	Feet from the 1650 ✓	East/West Line E	County SAN JUAN
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Bottom Hole Location

UI or lot no.	Section	Township	Range	Lot.Idn	Feet from the	North/South Line	Feet from the	East/West Line	County	
Lse Code		Producing Method Code		Gas Connection Date		C-129 Permit Number		C-129 Effective Date		C-129 Expiration Date

III. Oil and Gas Transporters

Transporter OGRID	Transporter Name and Address	POD	O/G	POD ULSTR Location and Description
25244	WILLIAMS FIELD SERVICES CO SALT LAKE CITY, UT 84158		G	B-19-T028N-R010W
9018	GIANT INDUSTRIES, INC. 5764 U.S. HWY. 64 FARMINGTON, NM 87401		O	B-19-T028N-R010W

IV. Produced Water

POD	POD ULSTR Location and Description
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V. Well Completion Data

Spud Date	Ready Date	TD	PBTD	Perforations
Hole Size	Casing & Tubing Size	Depth Set	Sacks Cement	

VI. Well Test Data

Date New Oil	Gas Delivery Date	Test Date	Test Length	Tbg. Pressure	Csg. Pressure
Choke Size	Oil	Water	Gas	AOF	Test Method

I hereby certify that the rules 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: *Dolores Diaz*

Printed Name:  
DOLORES DIAZ

Title:  
PRODUCTION ASSISTANT

Date:  
1 JANUARY, 1996

Phone  
(505) 326-9700

Approved by:

*37.8*

Title: SUPERVISOR DISTRICT #3

Approved Date:

JAN 12 1996

If this is a change of operator fill in the OGRID number and name of the previous operator  
21281 SOUTHLAND ROYALTY COMPANY

Previous Operator Signature

Printed Name

Title

Date

Signature: *Dolores Diaz*

DOLORES DIAZ

PRODUCTION ASSISTANT

1 JANUARY, 1996