

**OIL CONSERVATION DIVISION**

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

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

**REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS**

**I.**

Operator <b>MERIDIAN OIL INC.</b>	Well API No.
Address <b>P. O. Box 4289, Farmington, New Mexico 87499</b>	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input checked="" type="checkbox"/>
Recompletion <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Change in Operator <input checked="" type="checkbox"/>	
If change of operator give name and address of previous operator <b>Union Texas Petroleum Corporation, P. O. Box 2120, Houston, TX 77252-2120</b>	

**II. DESCRIPTION OF WELL AND LEASE**

Lease Name <b>ZACHRY</b>	Well No. <b>25</b>	Pool Name, Including Formation <b>OTERO CHACRA</b>	Kind of Lease State, Federal or Fee	Lease No. <b>SF080724A</b>
Location Unit Letter <b>M</b> : <b>990</b> Feet From The <b>S</b> Line and <b>940</b> Feet From The <b>W</b> Line Section <b>11</b> Township <b>28N</b> Range <b>10W</b> , <b>NMPM</b> , <b>SAN JUAN</b> County				

**III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS**

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input checked="" type="checkbox"/> <b>Meridian Oil Inc.</b>	Address (Give address to which approved copy of this form is to be sent) <b>P. O. Box 4289, Farmington, NM 87499</b>
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> <b>Sunterra Gas Gathering co.</b>	Address (Give address to which approved copy of this form is to be sent) <b>P.O. Box 26400, Albuquerque, NM 87125</b>
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. 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
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing Shoe			
<b>TUBING, CASING AND CEMENTING RECORD</b>								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

**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	
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

**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 **Leslie Kahwajy**  
Printed Name **Leslie Kahwajy** Prod. Serv. Supervisor  
Date **6/15/90** Telephone No. **(505)326-9700**

**OIL CONSERVATION DIVISION**

Date Approved **JUL 03 1990**

By **[Signature]**  
Title **SUPERVISOR DISTRICT #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 abulation 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.



**LTR**



**Job separation sheet**

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

RECEIVED  
BLM MAIL ROOM

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals.

SUBMIT IN TRIPLICATE

1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator

Meridian Oil Gathering Inc.

3. Address and Telephone No.

P.O. Box 4289, Farmington, NM 87499

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

11-28N-10W  
=====   
0970'S - 0940'W

5. Lease Designation and Serial No.

SE-080724A

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

ZACHRY #25

9. API Well No.

10. Field and Pool, or Exploratory Area

CH

11. County or Parish, State

SAN JUAN, NM

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☒ Notice of Intent  
☐ Subsequent Report  
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment  
☐ Recompletion  
☐ Plugging Back  
☐ Casing Repair  
☐ Altering Casing  
☒ Other Buried Gas Pipeline

- ☐ Change of Plans  
☐ New Construction  
☐ Non-Routine Fracturing  
☐ Water Shut-Off  
☐ Conversion to Injection  
☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

MERIDIAN OIL GATHERING INC. PROPOSES TO LAY A BURIED NATURAL GAS PIPELINE FROM THE ZACHRY #25 TO THE EXISTING ZACHRY #18-PC. THE LINE WILL BE BURIED A MINIMUM OF 36" BELOW THE SURFACE AND WILL BE MARKED WITH PIPELINE MARKERS.

-TIE LENGTH (BLM) = '631.78'

PIPE SPECIFICATIONS: GAS - 2" STEEL  
- WT = .156, GR=B  
- WP = 100#  
- OP = 1000#  
- TEST PRESSURE = 1110#  
- DEPTH = 36" MIN.

WATER - NONE

ARCH REPORT #: 93-SASI-019S(40)  
ARCH REPORT DATE: 06-29-93

SEE ATTACHED COPIES OF SURVEY PLAT AND TOPO.

RECEIVED

JUL 27 1993

OIL CON. DIV.  
DIST. 3

14. I hereby certify that the foregoing is true and correct

Title

KENT BEERS, ATTORNEY-IN-FACT

Signature

APPROVED

(This space for Federal or State office use)

Approved by  
Conditions of approval, if any:

Title

JUL 23 1993

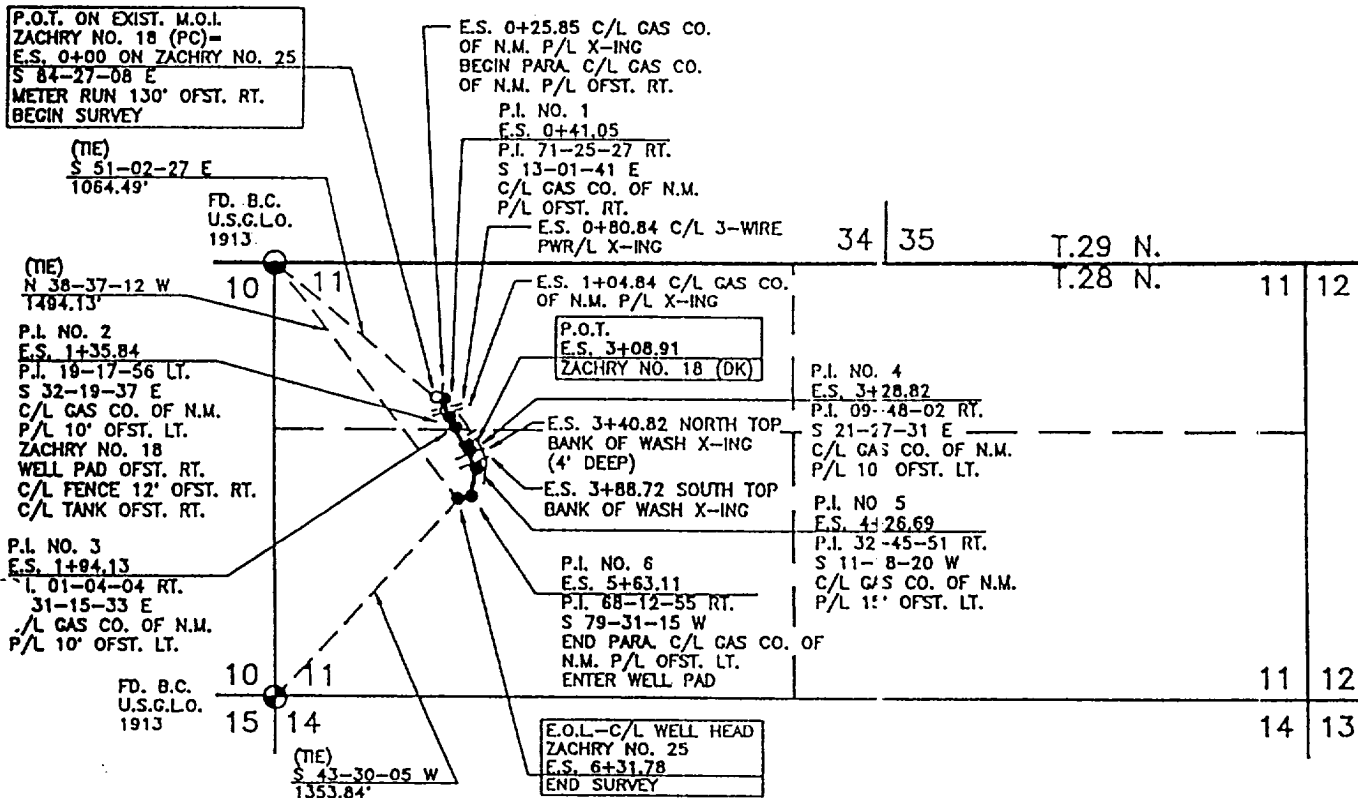
DISTRICT MANAGER

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

\*See Instruction on Reverse Side

NMOCD

A SURVEY FOR  
**MERIDIAN OIL, INC.**  
**GAS PIPELINE**  
**ZACHRY NO. 25**  
 SW/4 SEC.11, T.28 N., R.10 W., N.M.P.M.,  
 SAN JUAN COUNTY, NEW MEXICO



**NOTES:**

1. BASIS OF BEARING: C.L.O. RECORD BEARING AS MEASURED ALONG THE WEST LINE OF SECTION 11, T.28 N., R.10 W., N.M.P.M., SAN JUAN COUNTY, NEW MEXICO. BEARS: N 00-01-00 W
2. O = SET REBAR AT REFERENCE POINTS.

OWNER	STATION	FT./RODS
B.L.M.	0+00 TO 6+31.78	631.78/38.30



0 500 1000

SCALE: 1"=1000'

I, ROY A. RUSH, A DULY QUALIFIED LAND SURVEYOR LICENSED UNDER THE LAWS OF THE STATE OF NEW MEXICO, DO HEREBY CERTIFY THAT THIS PLAT CORRECTLY REPRESENTS A SURVEY MADE BY ME OR UNDER MY DIRECT SUPERVISION AND THAT THIS SURVEY MEETS THE AMENDED MINIMUM STANDARDS FOR LAND SURVEYS IN NEW MEXICO.

DATE: 6-10-93

REVISION REV. BY DATE

**DAGGETT SURVEYING, INC.**

P.O. BOX NO.2789  
 FARMINGTON, NEW MEXICO 87401  
 (505) 326-1772  
 REGISTERED LAND SURVEYOR  
 NEW MEXICO No.8894

