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

## State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104 Revised 1-109 7-22-93 See Instructions at Bottom of Page

P.O. Drawer DD, Artesia, NM 88210

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

## **OIL CONSERVATION DIVISION**

P.O. Box 2088

Santa Fe, New Mexico 8750004-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

l.					,				
Operator SOUTHLAND RO		Well API No.							
P.O. Box 4289, Farmington, New Mexico 87499									
Reason(s) for Filing (Check proper box)					Other (Please	explain)	*******************		
New Well		Change in Tra	ansporter of	L_	J				
	0:1		-	X					
Recompletion	Oil		Dry Gas	=					
Change in Operator	Casinghead	l Gas	Condensate						
If change of operator give name and address of previous operator							************		
•	T A NYD I	EACE							
II. DESCRIPTION OF WE	LL AND I	Pool Name, Inclu	ding Formation		Kind of Lease				
HUGHES	2	BASIN DAK	_		State Feder	ml br Fee	Lease No. SF 075794		
Location	1	JDASIII DAK	O1A		istate, i cuci	aron rec	131 073794	***************************************	
Unit Letter C	1120	Feet From The	N	Line and	2300	Feet From The	W	Line	
Section 23	Township	28N	Range	11W	,NMPM,	SAN JUAN		County	
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS									
Name of Authorized Transporter of Oil		or Condensate				ch approved conv	of this form to be	cont)	
MERIDIAN OIL INC.	or Condensate X			Address (Give address to which approved copy of this form to be sent) P. O. BOX 4289, FARMINGTON, NM 87499					
Name of Authorized Transporter of Casinghea				ļ	re address to which approved copy of this form to be sent)				
MERIDIAN OIL INC.	loas pi biy das		X			MINGTON, NM 87499		; sent)	
If well produces oil or	Unit	Sec.	Twp.	Rge.	Is gas actually		When?		
liquids, give location of tanks.	1 Cint	l Sec.	i wp.	, Rge.	is gas actually	connected?	when?		
	n any other lear	or pool give come					i		
If this production is commingled with that from any other lease or pool, give commingling order number:  IV. COMPLETION DATA									
IV. COMPLETION DATA	Oil Well	I Gas Well	! New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion - (X)	i On Wen	l Gas Well	:	;	· Deepen	I Trug Dack	i Saille Res v	l Dill Resv	
Date Spudded Date Compl. R	eady to Prod.		Total Depth	i		P.B.T.D.	L	L	
Elevations (DF, RKB, RT, GR, etc.)	Name of Produ	·	Top Oil/Gas Pay		Tubing Depth				
Perforations					Depth Casing Shoe				
TUBING, CASING AND CEMENTING RECORD									
HOLE SIZE				¬				ACKS CEMENT	
						STORE CEMENT			
				} 					
V. TEST DATA AND REQUEST FOR ALLOWABLE									
OIL WEL (Test must be after recovery o				reed ton allo	wahla for this da	nth or ha fee full 2	Ahoure I		
Date First New Oil Run To Tank	Date of Test				mp, gas lift, etc.)		+	-1,3,11, -1,1	
							5 😉 👪 🖟		
Length of Test Tubin		ibing Pressure		Casing Pressure Choke Size			1111 0 0 0		
			Water - Bbls.		1		JUL2 3 1	993	
Actual Prod. During Test	Oil - Bbls.		Water - Bbls.			Gas - MCF	CON.	DIV	
GAS WELL	45					4222222222	DIST.		
Actual Prod. Test - MCF/D	Length of Test		Bbls. Condensa	te/MMCF		Gravity of Conde	nsate	,	
Tarting Mathed (site) healt se	Tubing Pressure (Shut-in)		Casing Pressure (Shut-in)			Choke Size			
Testing Method (pitot, back pr.)	Tubing rressu	re (Shut-m)	Casing riessure	e (Shut-III)		Choke Size			
VI OPEDATOR CERTIFIC		COMPLIA	NCF	]				***************************************	
VI. OPERATOR CERTIFICATE OF COMPLIANCE  I hereby certify that the rules and regulations of the Oil Conservation Division have  OII CONSERVATION DIVISION									
been complied with and that the information given above is true and complete to the					OIL CONSERVATION DIVISION				
best of my knowledge and belief.				JUL 2 3 1993					
					Date Approved				
- Dusqni olan				7 1					
Signature				By Bul Rung					
Susan Dolan	Production Asst.			SUPERVISOR DISTRICT #3					
Printed Name		Title		Title		= 1001		· и»	
6/21/93		505-326-9700							
Date		Telephone No	).	1					

This form is to be filed in compliance with Rule 1104 **INSTRUCTIONS:** 

- 1) Request for allowable for newly drilled or deepened well must be accompained 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.