

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

OIL CONSERVATION DIVISION

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

water P.O.D
949150

I. **Operator** Meridian Oil Inc. **Well APN No.** 30-039-24833

Address PO Box 4289, Farmington, NM 87499

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: Evergreen Operating Corporation, Box 516, Aztec, NM 87410

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease State, Federal or Fee	Lease No. Fee
Rosa Unit 7440	311	Basin Fruitland Coal		

Location
Unit Letter H : 1430 Feet From The North Line and 645 Feet From The East Line
Section 28 Township 31N Range 4W , NMPM Rio Arriba County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒	Address (Give address to which approved copy of this form is to be sent)
Meridian Oil Inc. 949110	PO Box 4289, Farmington, NM 87499

Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)
30789 Associated Natural Gas, Inc. 949130	Box 5493, Denver, CO 80217; Att: Mr. Knipp

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
		X	X					

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

TUBING, CASING AND CEMENTING RECORD

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 100 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.)	Well Size

Length of Test	Tubing Pressure	Casing Pressure	Well Size

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

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GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate

Testing Method (pust, 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.

Peggy Bradfield
Signature
Peggy Bradfield Regulatory Rep.
Printed Name
7-14-93 Date
326-9700 Telephone No.

OIL CONSERVATION DIVISION

Date Approved JUL 16 1993

By Brian J. Chang
SUPERVISOR DISTRICT #3
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) If requested, this form must be filled out for allowable on new and recompleated wells.