

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**

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS	
Operator MERIDIAN OIL INC.	Well API No.
Address P. O. Box 4289, Farmington, New Mexico 87499	
Reason(s) for Filing (Check proper box)	
New Well ☐	☐ Other (Please explain)
Recompletion ☐	Change in Transporter of: Oil ☐ Dry Gas ☒
Change in Operator ☒	Coalbed Gas ☐ Condensate ☐
If change of operator give name and address of previous operator	
Union Texas Petroleum Corporation, P. O. Box 2120, Houston, TX 77252-2120	

II. DESCRIPTION OF WELL AND LEASE

Lease Name NORHAUS	Well No. 2	Pool Name, including Formation BLANCO MESAVERDE	Kind of Lease State, Federal or Fee	Lease No. SF078508
Location Unit Letter <u>L</u> : <u>1605</u> Feet From The <u>S</u> Line and <u>800</u> Feet From The <u>W</u> Line Section <u>11</u> Township <u>31N</u> Range <u>09W</u> , NMPM, SAN JUAN County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☒ Meridian Oil Inc.							Address (Give address to which approved copy of this form is to be sent) P. O. Box 4289, Farmington, NM 87499	
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒ Union Texas Petroleum Corp.							Address (Give address to which approved copy of this form is to be sent) P.O. Box 2120, Houston, TX 77252-2120	
If well produces oil or liquids, give location of tank.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When?		
If this production is commingled with that from any other lease or pool, give name of pool.								

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			
TUBING, CASING AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT			

V. TEST DATA AND REQUEST FOR ALLOWABLE
ON THIS:

OIL WELL

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

Date First New Oil Run To Tank	Date of Test	Producing Method (Flowing or Pumped)	
Length of Test	Tubing Pressure	Casing Pressure	
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	

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 WORK

VL OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Civil 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 Kahway Prod. Serv. Supervisor
Printed Name 6/15/90 Title (505) 326-9700
Date _____ Telephone No. _____

OIL CONSERVATION DIVISION

Date Approved _____ JUL 03 1990

By Brian J. Chang
Title _____ SUPERVISOR DISTRICT #3

Title _____ SUPERVISOR DISTRICT #3

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104
1) Request for allowance of a new trademark

- 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.