

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 1-1-89
See Instructions
at Bottom of Page
C/SF
UT
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dp

OIL CONSERVATION DIVISION

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

FEB 10 1989

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

ARTESIA OFFICE

Operator Meridian Oil Inc.		Well API No. 30-015-26025
Address 21 Desta Drive, Midland, Texas 79705		
Reason(s) for Filing (Check proper box) New Well <input checked="" type="checkbox"/> <input type="checkbox"/> Other (Please explain) Recompletion <input type="checkbox"/> Oil <input type="checkbox"/> Change in Transporter of: Change in Operator <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Dry Gas <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 Apache Federal	Well No. 1	Pool Name, Including Formation Parkway (Delaware)	Kind of Lease State, Federal or Fee	Lease No. NM-54865
Location Unit Letter I : 1980 Feet From The South Line and 990 Feet From The East Line Section 35 Township 19-S Range 29-E, NMPM, Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Texaco Trading And Transportation	Address (Give address to which approved copy of this form is to be sent) Box 6196, Midland, Texas 79711					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillip 66	Address (Give address to which approved copy of this form is to be sent) 4001 Penbrook, Odessa, Texas 79762					
If well produces oil or liquids, give location of tanks.	Unit I	Sec. 35	Twp. 19-S	Rge. 29-E	Is gas actually connected? Yes	When? Unknown

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 XX	Gas Well	New Well XX	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 12-12-88	Date Compl. Ready to Prod. 1-18-89		Total Depth 4500'		P.B.T.D. 4453'			
Elevations (DF, RKB, RT, GR, etc.) 3331' GR	Name of Producing Formation Delaware		Top Oil/Gas Pay 4182'		Tubing Depth 4152'			
Perforations 4182-4218'					Depth Casing Shoe --			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/2"	13-3/8"		365'		805 sx. C1 "C"			
12-1/4"	8-5/8"		3200'		1500 sx Silic/400sx C1 "C"			
7-7/8"	5-1/2"		4500'		400 sx Silic/250sx C1 "C"			

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 1-8-89	Date of Test 2-1-89	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 Hr.	Tubing Pressure --	Casing Pressure 25	Choke Size Post ID-2 2-24-89
Actual Prod. During Test	Oil - Bbls. 143	Water - Bbls. 102	Gas- MCF 124

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
Marianne Martin
Printed Name
Marianne Martin
Date
2-3-89
Operations Tech III
Title
(915) 686-5657
Telephone No.

OIL CONSERVATION DIVISION

Date Approved FEB 23 1989

By Original Signed By
Mike Williams

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) 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.