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State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

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

RECEIVED

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

MAY -1 '89

O. C. D.

ARTESIA, OFFICE

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator Meridian Oil Inc.		Well API No. 30-015-26083
Address 21 Desta Drive Midland, Texas 79705		
Reason(s) for Filing (Check proper box) New Well <input checked="" type="checkbox"/> Other (Please explain) <input checked="" type="checkbox"/> Recompletion <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Change in Operator <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> Request test allowable of 1000 bbls. production from Parkway (Delaware), perfs. 4136' - 4229'. CASINGHEAD GAS MUST NOT BE FLARED AFTER 7-3-89		
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name Apache "A" Federal	Well No. 2	Pool Name, Including Formation Parkway (Delaware)	Kind of Lease State, Federal or Pool	Lease No. NM-61582
Location Unit Letter B : 990 Feet From The North Line and 1980 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 Texaco Trading & Transportation	<input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) P.O. Box 6196, Midland, Texas 79711				
Name of Authorized Transporter of Casinghead Gas Phillips Pipeline Co.	<input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	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 B	Sec. 35	Twp. 19-S	Rge. 29-E	Is gas actually connected? no	When? unknown at present

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 4/3/89	Date Compl. Ready to Prod. 4/20/89	Total Depth 4550'	P.B.T.D. 4504'					
Elevations (DF, RKB, RT, GR, etc.) 3314' GR	Name of Producing Formation Delaware	Top Oil/Gas Pay 4136'	Tubing Depth 3959'					
Performances 4136' - 4229' (71 holes)			Depth Casing Shoe					
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
17-1/2	13-3/8	365'	478 sx C1 C 2% CaCl ₂					
12-1/4	8-5/8	3210'	2800 sx C1 C					
7-7/8	5-1/2	4550	500 sx 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 4/21/89	Date of Test 4/22/89	Producing Method (Flow, pump, gas lift, etc.) flowing	
Length of Test 24 hrs.	Tubing Pressure 620	Casing Pressure ---	Choke Size 16/64"
Actual Prod. During Test	Oil - Bbls. 105	Water - Bbls. 110	Gas - MCF 160

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

Connie Monahan Operations Tech III

Printed Name

4/26/89

915/686-5681

Date

Telephone No.

OIL CONSERVATION DIVISION

Date Approved APR 28 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.