

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

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

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

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

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

SEP 25 '89

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator Meridian Oil Inc. ✓	Well API No. 30-015-26143
Address 21 Desta Drive, Midland, Texas 79705	
Reason(s) for Filing (Check proper box) New Well <input checked="" type="checkbox"/> <input type="checkbox"/> Change in Transporter of: 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"/> <input type="checkbox"/> Other (Please explain) Casinghead Gas MUST NOT BE FLARED AFTER 11/27/89 UNLESS AN EXCEPTION FROM THE B.L.M. IS OBTAINED	
If change of operator give name and address of previous operator	

II. DESCRIPTION OF WELL AND LEASE

Lease Name Apache "A" Federal	Well No. 4	Pool Name, Including Formation Parkway (Delaware)	Kind of Lease State, Federal or Fee	Lease No. NM-61582
Location Unit Letter D : 990 Feet From The North Line and 940 Feet From The West Line Section 35 Township 19 South Range 29 East, 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 Delaware Natural Gas Co., Inc.	<input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) 911 Jollyville Rd., Suite 215, Austin, TX 78759				
If well produces oil or liquids, give location of tanks.	Unit D	Sec. 35	Twp. 19S	Rge. 29E	Is gas actually connected? No	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 X	Gas Well	New Well X	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 7/13/89	Date Compl. Ready to Prod. 8/16/89	Total Depth 4550'	P.B.T.D. 4505'					
Elevations (DF, RKB, RT, GR, etc.) 3310 GR	Name of Producing Formation Delaware	Top Oil/Gas Pay 4295'	Tubing Depth 4474'					
Perforations 4295' - 4461' 1 JSPF (20 holes)	Depth Casing Shoe 4550'							
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
17 1/2"	13 3/8"	353'	446 SX Post ID-2					
12 1/4"	8 5/8"	3200'	4145 SX 9-29-89					
7 7/8"	5 1/2"	4550'	425 SX comp & BK					
	2 3/8" (tbq.)	4474'						

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 8/20/89	Date of Test 8/23/89	Producing Method (Flow, pump, gas lift, etc.) 2" x 1 1/2" x 16' insert pump	
Length of Test 24 hrs.	Tubing Pressure 0	Casing Pressure 0	Choke Size ---
Actual Prod. During Test	Oil - Bbls. 93	Water - Bbls. 420	Gas - MCF 175

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
R. L. Bradshaw, Sr. Staff Env./Reg. Spec.
Printed Name
9/22/89 (915) 686-5678 Title
Date
Telephone No.

OIL CONSERVATION DIVISION

Date Approved SEP 26 1989

By ORIGINAL SIGNED BY
MIKE WILLIAMS
Title SUPERVISOR, DISTRICT IV

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.