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U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRODUCTION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS
RECEIVED

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

SEP 13 1973

I. Operator Meadco Properties, Ltd. ✓		O. C. C. ARTESIA, OFFICE	
Address 407 West Wall St., Midland, Texas 79701			
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well	☒	Designate Change in Transporter of:	
Recompletion	☐	Oil ☐	Dry Gas ☒
Change in Ownership	☐	Casinghead Gas ☒	Condensate ☐

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE		Lease No.	
Lease Name Harris-Bell Corn	Well No. 1	Pool Name, including Formation Golden Lane Strawn	State, Federal or Fee Federal NM-0558014
Location			
Unit Letter H	1980	Feet From The North	660 Feet From The East
Line of Section 5	Township 21-S	Range 29-E	County Eddy

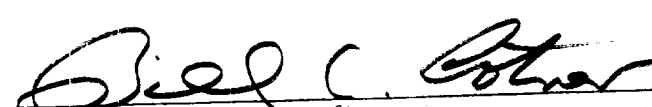
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS		Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Oil ☐ or Condensate ☒	The Permian Corporation - Trucks	P.O. Box 1183, Houston, Texas 77001	
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐	El Paso Natural Gas Company	P. O. Box 1492, El Paso, Texas 79978	
If well produces oil or liquids, give location of tanks.	Unit H	Sec. 5	Twp. 21
		Rec. 29	Is gas actually connected? No yes
			When 2 weeks 9-20-73

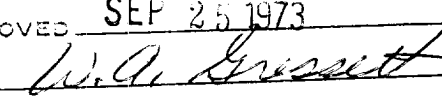
If this production is commingled with that from any other lease or pool, give commingling order number: _____

IV. COMPLETION DATA		Oil Well		Gas Well		New Well		Workover		Deepen		Plug Back		Same Res'v.		Diff. Res'v.	
Designate Type of Completion - (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 top allowable for this depth or be for full 24 hours)	
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Ebbs.	Gas-MCF

GAS WELL		Bbls. Condensate/MMCF		Gravity of Condensate	
Actual Prod. Test-MCF/D	Length of Test				
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size		

VI. CERTIFICATE OF COMPLIANCE	
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.	
	
Agent	(Title)
9/12/73	(Date)

OIL CONSERVATION COMMISSION	
APPROVED	SEP 25 1973
BY	
TITLE OIL AND GAS INSPECTOR	
This form is to be filed in compliance with RULE 1104.	
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.	
All sections of this form must be filled out completely for allowable on new and recompleted wells.	
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.	
Separate Forms C-104 must be filed for each pool in multiply completed wells.	