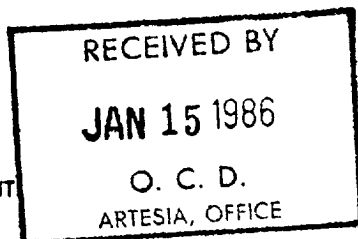


STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
Meridian Oil Inc. ✓

Address
1800 Wilco Bldg. Midland, Texas 79701

Reason(s) for filing (Check proper box)
☒ New Well
☐ Recompletion
☒ Change in Operator
 Change in Transporter of:
☐ Oil
☐ Casinghead Gas
☐ Dry Gas
☐ Condensate

Other (Please explain): CASINGHEAD GAS MUST NOT BE FLAMED AFTER 3-1-86 UNLESS AN EXCEPTION FROM THE B. L. M. IS OBTAINED

If change of ownership give name and address of previous owner: El Paso Exploration Company 1800 Wilco Bldg. Midland, Tx 79701

II. DESCRIPTION OF WELL AND LEASE

Lease Name Pecos Federal	Well No. 3	Pool Name, including Formation Brushy Draw Delaware	Kind of Lease State, Federal or Fee Federal	Lease No. NM58034
Location Unit Letter <u>0</u> ; <u>1980</u> Feet From The <u>East</u> Line and <u>760</u> Feet From The <u>South</u> Line of Section <u>27</u> Township <u>26S</u> Range <u>29E</u> , NMPM, <u>Eddy</u> 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"/> Koch Oil Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 2256 Wichita, Ks 67201 <u>Post EO-2</u>	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Conoco, Inc.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 90 Maljamar, NM 88264 <u>1-3-86</u> <u>chg op</u>	
If well produces oil or liquids, give location of tanks. Unit: <u>P</u> Sec.: <u>27</u> Twp.: <u>26S</u> Rge.: <u>29E</u>	Is gas actually connected? <u>yes</u>	When

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

Cande Myers
(Signature)
Production Clerk
(Title)
1-9-86
(Date)

OIL CONSERVATION DIVISION

APPROVED JAN 23 1986, 19
BY Les A. Clements
Original Signed By
TITLE Supervisor District II

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.

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 11-02-85	Date Compl. Ready to Prod. 11-28-85		Total Depth 5505		P.B.T.D. 5457				
Elevations (DF, RKB, RT, GR, etc.) 2868 GR	Name of Producing Formation Delaware Sand		Top Oil/Gas Pay 4883		Tubing Depth 4941				
Perforations 4883-4979 (46 holes)						Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
17 1/2	13 3/8		396		Circ to surface				
11	8 5/8		2845		Circulate				
7 7/8	4 1/2		5500		3850 TS				

V. TEST DATA AND REQUEST FOR ALLOWABLE (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 11-30-85	Date of Test 12-11-85	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hours	Tubing Pressure 290	Casing Pressure 290	Choke Size 12/24
Actual Prod. During Test 2000 bbls	Oil - Bbls. 121	Water - Bbls. 22	Gas - MCF 38

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