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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

DISTRICT II P.O. Drawer DD, Artesia, NM 88210 OIL CONSERVATION DIVISION
P.O. Box 2088

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

Santa Fea New Mexico 8750004=2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

1.								
Meridian Oil Inc.				Well API No.				
P.O. Box 4289,	Farmington, New Mexic	o 87499						
Reason(s) for Filing (Check proper box)			Ī	Other (Please	explain)			
New Well	Change in	T		<u>V</u>				
		Change in Transporter of:			WELL NAME CHANGED FROM JICARILLA B 4			
Recompletion	Oil	Oil Dry Gas			WEED IVAILE ON WOOD I ROW WE AND A TO			
Change in Oprator X	Casinghead Gas	Condensate	e X	Effective 8	3/1/92			
If change of operator give name								
and address of previous operator			., Nine G	reenway Pl	aza, Suite 2	700,		
II. DESCRIPTION OF V	VELL AND LEASE	,		ton, Texas				
Lease Name		cluding Formation	11040	Kind of Lease	77010	Lease No.		
JICARILLA 98		MESAVERDE		State, Fede	ral or Fee	JICARILLA	98	
Location		, , 		1		10101222		
Unit Letter N	: 990 Feet From The	: S	Line and	1500	Feet From The	W	Line	
Section 19	Township 26N	Range	-3W	NMPM,	RIO ARRIBA	Α	County	
III. DESIGNATION OF	TRANSPORTER OF C	IL AND N	ATURA					
Name of Authorized Transporter of Oil	or Condensate		Address (Gi	ve address to whi	ich approved copy	of this form to be	sent)	
MERIDIAN OIL INC		P.O. BOX 4			e address to which approved copy of this form to be sent)			
Name of Authorized Transporter of Casin NORTHWEST PIPELINE COM		X -						
If well produces oil or	Unit Sec.			T	LT LAKE CIT		8-0900	
liquids, give location of tanks.	Sec.	Twp.	Rge.	Is gas actually	connected?	When ?		
If this production is commingled with tha	t from any other leave or neal give one	1	1			.l		
IV. COMPLETION DAT	$\Gamma {f A}$	iuningling order n	iumber:					
	Oil Well Gas Well	New Well	Workover	ı Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion - (X) Date Spudded Date Corr	1	<u> </u>	<u> </u>	l +	ł L	1 j		
Date Spudded Date Con	npl. 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			<u> </u>					
	TUBING, CASIN	C AND CEN	ENTING	DECORD	Depth Casing Sho	oe		
HOLE SIZE	CASING & TUBIN		LENTING					
HOLE SIZE	CASING & TUBING	GSIZE	SIZE DEPTH SET		SACKS CEMEN		ACKS CEMENT	
V. TEST DATA AND RE	EQUEST FOR ALLOW	ARIF	<u> </u>			L		
			2					
OIL WEL (Test must be after recov Date First New Oil Run To Tank	Date of Test	Producing Met	bod (Flow pu	mp, gas lift, etc.)	pth or be for full 2	24 hours.)	···	
		1 roddenig mee	nod (1 iow, pu	inp, gas int, etc.)		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
Length of Test	Tubing Pressure	Casing Pressur	e	Choke Size	- 117 ~	e offic was fr		
			-		4 14	1 0 3 0 00		
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.		1	Gas - MCF	10 12 0 10 15 15 15 15 15 15 15 15 15 15 15 15 15	2	
C. I. C. L.						COAL	F-174.1	
GAS WELL					See F	GETT VO	W: 1.	
Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensa	nte/MMCF		Gravity of Conde	nsa VISI. 3		
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure	e (Shut-in)		Choke Size			
			` ′					
VI. OPERATOR CERTI	FICATE OF COMPLIA	ANCE						
	gulations of the Oil Conservation Divisi			TI CONG		. DILITOTO	•	
been complied with and that the information given above is true and complete best of my knowledge and belief.		ete to the	to the		IL CONSERVATION		'N	
					AUG 0	6 1992		
\mathcal{Z}_{α} \mathcal{A}_{α}	10h 111		Date Appi	roved		.002		
CHULL P	Juliuny.]	7	\ G	1		
Signature	' 01		Ву			home		
Leslie Kahwajy	Production	Analyst]	SUP	ERVISOR D	ISTDIA	_	
Printed Name	Title		Title			STRICT &	3	
7/31/92	505-326-970							
Date	Telephone N	√o.	}					

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompained 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.