...Mexico

...Natural Resources Department

...L CONSERVATION DIVISION

...P.O. Box 2088

...Santa Fe, New Mexico ...4-2088

...Instructions ...Bottom of Page

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

...Operator

...API No. 14538

...Address

...Reason(s) for filing (Check proper box)

New Well [ ]
...completion [ ]
Change in Operator [ ]

Change in Transporter of: Oil [ ] Dry Gas [ ] Casinghead Gas [ ] Condensate [ ]

Other (Please explain) Name change from Huerfano Unit 261

If change of operator give name and address of previous operator

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease (State, Federal or Fee)	Lease No.
Huerfano Unit NP 7142	261	Basin Dakota 71599	SF-080893	

Location

Unit Letter ... : 800 Feet From The South Line and 1650 Feet From The West Line

Section 20 Township 26 Range 10 NMPM, San Juan County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil or Condensate	Address (Give address to which approved copy of this form is to be sent)
Meridian Oil Inc.	PO Box 4289, Farmington, NM 87499
Name of Authorized Transporter of Casinghead Gas or Dry Gas: EPNG	Address (Give address to which approved copy of this form is to be sent)

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When ?

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
		X	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

RECEIVED
MAR - 9 1994
OIL CON. DIV.
DIST. 3

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	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 - Bbls.	Gas- MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate

Testing Method (pitot, 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

Printed Name

Title

Date

Telephone No.

OIL CONSERVATION DIVISION

Date Approved MAR 9 1994

By Bill Sheppard

SUPERVISOR DISTRICT #3

Title

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

...ALLOWABLE FOR NEWLY DRILLED OR DEEPENED WELL must be accompanied by tabulation of deviation tests taken in accordance ...Rule 111.