

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

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.
Address PO Box 4289, Farmington, NM 87499	
Reason(s) for Filing (Check proper box) ☐ Other (Please explain)	
New Well ☒	Change in Transporter of:
Recompletion ☐	Oil ☐ Dry Gas ☐
Change in Operator ☐	Casinghead Gas ☐ Condensate ☐
If change of operator give name and address of previous operator	

II. DESCRIPTION OF WELL AND LEASE

Lease Name Turner Hughes	Well No. 272	Pool Name, including Formation Basin Fruitland Coal	Kind of Lease State, Federal or Fee	Lease No. SF-078050
Location				
Unit Letter B	790	North	1330	East
Feet From The Line and Feet From The Line				
Section 4	Township 27N	Range 9W	NMPM,	San Juan
County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil Meridian Oil Inc.	or Condensate ☒	Address (Give address to which approved copy of this form is to be sent) PO Box 4289, Farmington, NM 87499				
Name of Authorized Transporter of Casinghead Gas El Paso Natural Gas Company	or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent) PO Box 4990, Farmington, NM 87499				
If well produces oil or liquids, give location of tanks.	Unit B	Sec. 4	Twp. 27N	Rge. 9W	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 04-10-89	Date Compl. Ready to Prod. 05-18-89	Total Depth 2942'		P.B.T.D.				
Elevations (DF, RKB, RT, GR, etc.) 6860' GL	Name of Producing Formation Fruitland Coal	Top Oil/Gas Pay 2815'		Tubing Depth 2902'				
Performances 2815-25', 2830-31', 2839-43', 2877-79' w/2 spf; 2910', 2911', 2913', 2915', 2916', 2919', 2922', 2925 w/1				Depth Casing Shoe 2942'				
TUBING, CASING AND CEMENTING RECORD hole each								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4"	9 5/8"		526'		437 cu.ft.			
8 3/4"	7"		2976'		887 cu.ft.			
6 1/4"	4 1/2"		2942'		98 cu.ft.			
	2 3/8"		2902'					

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.)

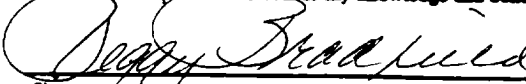
Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (puet, back pr.) backpressure	Tubing Pressure (Shut-in) SI 394	Casing Pressure (Shut-in) NC	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
Peggy Bradfield, Regulatory Affairs
Printed Name
6-3-89
Date
326-9727
Telephone No.

OIL CONSERVATION DIVISION

Date Approved JUN 13 1989
By Original Signed by FRANK T. CHAVEZ
Title SUPERVISOR DISTRICT # 3

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.