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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

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

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

perator							Well Al	1110		
Meridian Oil Inc.							l			
dress . O. Box 4289, Farmin	aton.	NM 87	499						_	
son(s) for Filing (Check proper box)	g con,				Other	(Please expla	in)			
w Well		Change in	•	_						
completica 🔲	Oil .		Dry Gas	_	Effoct	ive 6/23	3/90			
ange in Operator		d Cas 🔼						n TY 77	252-212	0
unge of operator give same unio	n Texa	<u>s Petr</u>	oleun	i Corp.	P. U. E	0X 2120	, nousco	n, TX 77	232-212	<u> </u>
DESCRIPTION OF WELL	AND LE	ISE							1 10	se No.
see Name		Well No.		me, Including			Kind of State, F	ederal) or Fee	SF-047	
ngel Peak B		37	ocei	U Cliac	1 a				101 0 11	
cation A	. 795	)	Feet Pro	- The	N Line	and !	569 <b>F</b> ∞	t From The	E	Line
Unit Letter	_ :		, real ric				San Juan			Country
Section 24 Township	<b>p</b> 28	N	Range	1 1 W	, NIA	PM,	San Juan			County
DESIGNATION OF TRAN	CPADTE	ጉ ወደ ወ'	II. ANI	D NATTIE	RAL GAS					
ms of Authorized Transporter of Oil	<u>ν.σ.σ.τ.σ</u>	or Conden	este	_ 1	Address (GIN	address to wi	rich approved	copy of this for	m is 10 be se 07.400	u)
Meridian Oil Inc.					P. 0. Bo	x 4289,	Farming	ton, NM	8/499 m is to be see	u)
me of Authorized Transporter of Casin	ghead Gas	(X)	or Dry	Ges []	P. O. Bo	x 4289.	Farmino	ton, NM	87499	
Meridian Oil Inc.	Unit	Sec.	Twp.		ls gas actuall		When			· · · · · · · · · · · · · · · · · · ·
location of tanks.		<u>.                                    </u>	<u> </u>							<del></del>
his production is commingled with that	from any oth	her lease or	pool, giv	re commingli	ing order numi	er:				
. COMPLETION DATA		Oil Well	<u> </u>	Gas Well	New Well	Workover	Doepea	Plug Back	Same Res'v	Diff Res'v
Designate Type of Completion	- (X)	1	` <b>i</b> `		i		<u>i                                     </u>			<u> </u>
te Spudded		pl. Ready L	o Prod.		Total Depth	-		P.B.T.D.		
					Top Oil/Gas	Pay		Tubing Depth		
evations (DF, RKB, RT, GR, etc.)	Name of a	Producing P	OHIMA	'						
aforations								Depth Casing	Shoe	
		=		NG AND	CENTENER	NC PECOL	2D	<u> </u>		
1015 6175		ASING & T			CEMENT	DETH	GIM	S S	ACKS CEM	ENT
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TEST DATA AND REQUE	ST FOR	ALLOW	ABLE	;		H CO	N. DI	Vai		
. TEST DATA AND REQUE IL WELL (Test must be after	ST FOR recovery of	ALLOW	ABLE e of load	oil and must	be equal to o	oxeed DE	N. DI	is depth or be f	or full 24 hou	FS.)
IL WELL (Test must be after	EST FOR recovery of Date of T	total volum	ABLE e of load	oil and must	t be equal to o	exceed DAS	M. DI Maile for th pump, Eas lift,	is depth or be f	or full 24 hou	vs.)
IL WELL (Test must be after nate First New Oil Run To Tank	Date of 1	total volum Test	VABLE se of load	oil and must	t be equal to o Producing N	lethod (Flow, )	N. Di making for th pump, gas lift,	is depth or be felc.)  Choke Size	or full 24 hos	rs.)
IL WELL (Test must be after nate First New Oil Run To Tank	recovery of	total volum Test	VABLE se of load	oil and must	Casing Pres	ure	N. DI Mywaith for th pump, Eas lift,	Choke Size	or full 24 hou	vs.)
IL WELL (Test must be after bute First New Oil Run To Tank ength of Test	Date of 1	total volum Test Pressure	VABLE se of load	oil and must	Producing N	ure	N. DI Myaldy for th pump, gas lift,		or full 24 hos	rs.)
IL WELL (Test must be after base First New Oil Run To Tank ength of Test	Date of Tubing P	total volum Test Pressure	VABLE se of load	oil and must	Casing Pres	ure	N. DI Twaldy for th pump, gas lift,	Choke Size	or full 24 hos	ss.)
IL WELL (Test must be after the First New Oil Run To Tank ength of Test actual Prod. During Test GAS WELL	Tubing P	total volum Test Pressure	VABLE se of load	oil and must	Casing Pres Water - Bbi	ure	N. DI Quality for th pump, gas lift,	Choke Size		73.)
IL WELL (Test must be after the First New Oil Run To Tank ength of Test actual Prod. During Test GAS WELL	Date of Tubing P	total volum Test Pressure	VABLE se of load	oil and must	Casing Pres Water - Bbi	ure	N. DI Twaldy for th pump, gas lift,	Choke Size  Gas- MCF  Gravity of C	Condensate	σε.)
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IL WELL (Test must be after the First New Oil Run To Tank ength of Test tental Prod. During Test GAS WELL Actual Prod. Test - MCF/D	Tubing P Oil - Bbl	Test Pressure	e of load	oil and must	Casing Pres Water - Bbi	ure L anse/MMCF	, 20, 31,	Choke Size  Gas- MCF  Gravity of C	Condensate	73.)
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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.