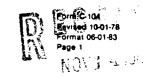
STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

DISTRIBUTI	0#		
BANTA PE		Γ	
FILE			
U.6.G.6.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OF	HCE		

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



Separate Forms C-104 must be filed for each pool in multiply completed wells.

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS I.						
Meridian Oil Inc.						
PO Box 4289, Farmington, NM 8749	99					
Reason(s) for filing (Check proper box)	Other (Please explain)					
New Well Change in Transporter of:						
Recompletion Oil	Dry Gas					
Change in Ownership Casinghead Gas	Condensate -					
If change of ownership give name and address of previous owner						
II. DESCRIPTION OF WELL AND LEASE						
Lease Name Well No. Pool Name, Inclu						
Howell E 300 BASIN I	ruitland Coal Stote, Federal or Fee NM-012708					
Location						
Unit Letter A : 850 Feet From The Nort	th Line and 1170 Feet From The East					
Line of Section 14 Township 30N Rang	• 8W , NMPM, San Juan County					
III. DESIGNATION OF TRANSPORTER OF OIL AND NAT Name of Authorized Transporter of Oil	DO Roy 1289 Farmington NM 87199					
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 been complied with and that the information given is true and complete to the life.	OIL CONSERVATION DIVISION 14 1988 APPROVED					
my knowledge and belief.	BY Original Styned by FRANK T. CHAVEZ					
	TITLE					
Seasy Dradfield	This form is to be filed in compliance with RULE 1104.					
(Signature) Regulatory Affairs	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.					
(Title)	All sections of this form must be filled out completely for allowable on new and recompleted wells.					
November 10, 1988	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.					
(Date)	I MAIT BELLE OF BRIDGE, OF STEUS BOLLAN OF STUAR STEUS OF CONSTSTORY					

IV.	CO	MPI	FTT	ON	D	ATA
IV.	\mathbf{co}	VI P L	.c.i	\mathbf{O}^{1}	$-\omega$	תור

Designate Type of Comple	etion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Restv. Diff. Rest
Date Spudded 8 - 9 - 88		. Ready to P 9 - 10 - 8		Total Depth	2720'		P.B.T.D.	
Elevations (DF, RKB, RT, GR, etc. 704 GL	Name of Pro-	Name of Producing Formation Fruitland Coal		Top Oll/Gas Pay 2560 1		Tubing Depth 2714'		
Perforations 2560-2719' (pred	lrilled p	erfs)					Depth Caste 2720	7
		TUBING,	CASING, AN	D CEMENTI	IG RECOR)		
HOLE SIZE		NG & TUBI	NG SIZE		DEPTH SE	т	SA	CKS CEMENT
12 1/4"	9	5/8''			2281		177	cu.ft.
8 3/4"	7	11		2	545'			cu.ft.
6 1/4"	5	1/2"		2	720'			not cmt
	12	7/8"		2	714'		1	

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 allow-OIL WELL 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)

OIL WELL						
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pum	Producing Method (Flow, pump, gas lift, etc.)			
Length of Test	Tubing Pressure	Casing Pressure	Choke Size			
Actual Prod. During Test	Oil - Bbie.	Water - Bble.	Gas • MCF			
		· ·				

GAS WELL

Actual Prod. Tool-MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate	
Teeting Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Cosing Pressure (Shut-in)	Choke Size	
<u>backpressure</u>	SI 888	SI 1453		_