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Appropriate District Office
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P.O. Box 1980, Hobbs, NM 88240

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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

RECEIVED
DEC 06 1989

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

OIL CON. DIV. J

I.

Operator
Meridian Oil Inc. Well APN# DIST. 3

Address
PO Box 4289, Farmington, NM 87499

Reasons 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 Stanolind Gas Com	Well No. 300	Pool Name, including Formation Basin Fruitland Coal	Kind of Lease State, Federal or Fee	Lease No. B-10938-36
Location Unit Letter B : 790 Feet From The North Line and 1605 Feet From The East Line Section 16 Township 30N Range 8W 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 ELPASC NATURAL GAS CO. ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent) PO Box 1492, EL PASO TX.					
If well produces oil or liquids, give location of tanks.	Unit B	Sec. 16	Twp. 30N	Rgs. 8W	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 05-21-89	Date Compl. Ready to Prod. 06-08-89		Total Depth 2606'		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.) 5785' GL	Name of Producing Formation Fruitland Coal		Top Oil/Gas Pay 2426'		Tubing Depth 2572'			
Performances 2426-2602' (predrilled liner)					Depth Casing Shoe 2605'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4"	9 5/8"		240'		236 cu.ft.			
8 3/4"	7"		2371'		690 cu.ft.			
6 1/4"	5 1/2"		2605'		did not cmt			
	2 3/8"		2572'					

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 (press. back pr.) backpressure	Tubing Pressure (Shut-in) SI 1457	Casing Pressure (Shut-in) SI 1463	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
J. W. Caldwell, Regional Drilling Engineer
Printed Name
06-20-89
Date
326-9727
Telephone No.

OIL CONSERVATION DIVISION

Date Approved DEC 07 1989

By Original Signed by FRANK T. CHAVEZ

Title SUPERVISOR DISTRICT # 1

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.