

Submit 5 Copies
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

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

OIL CONSERVATION DIVISION

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

I.

Operator Meridian Oil Inc.	Well APN No. 30-039-24612
Address PO Box 4289, Farmington, NM 87499	
Reason(s) for Filing (Check proper box) New Well ☒ Other (Please explain) ☐ Recompletion ☐ Change in Transporter of: 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 Rosa Unit	Well No. 259	Pool Name, including Formation Basin Fruitland Coal	Kind of Lease State, Federal or Fee	Lease No. SF-078773
Location Unit Letter N : 1300 Feet From The South Line and 905 Feet From The West Line Section 33 Township 31 Range 5, NMPM, Rio Arriba 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 Northwest Pipeline	or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent) 3539 E. 30th, Farmington, NM 87401				
If well produces oil or liquids, give location of tanks.	Unit N	Sec. 33	Twp. 31	Rge. 5	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 12-18-89	Date Compl. Ready to Prod. 01-11-90		Total Depth 3402'		P.B.T.D.			
Formations (DF, RKB, RT, GR, etc.) 6520' GL	Name of Producing Formation Fruitland Coal		Top Oil/Gas Pay 3232'		Tubing Depth 3387'			
Perforations 3232 - 3352					Depth Casing Shoe			

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4"	9 5/8"	230'	184 cu.ft.
8 3/4"	7"	3217'	1020 cu.ft.
6 1/4"	4 1/2"	3400'	76 cu.ft. (59 cu.ft. (page 2))
	2 3/8"	3387'	

V. TEST DATA AND REQUEST FOR ALLOWABLE

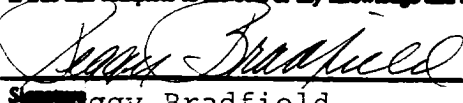
OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth for full 24 hours.)			
Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.) FEB 15 1990	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size OIL CON. DIV. DIST. 3
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D 757 M	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.) backpressure	Tubing Pressure (Shut-in) SI 287	Casing Pressure (Shut-in) SI 358	Choke Size

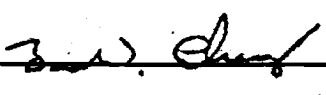
VI. OPERATOR CERTIFICATE OF COMPLIANCE

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 Reg. Affairs
Printed Name
Date 2-12-90 Title 326-9700
Telephone No.

OIL CONSERVATION DIVISION

Date Approved FEB 28 1990

By 
Title SUPERVISOR DISTRICT #3

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

- Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- All sections of this form must be filled out for allowable on new and recompleted wells.
- Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- Separate Form C-104 must be filed for each pool in multiply completed wells.