

Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. District Office, Aztec, 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. 30-039-24911
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 Rosa Unit	Well No. / Pool Name, including Formation 271 / Basin Fruitland Coal	Kind of Lease State, Federal or Fee	Lease No. SF-078773
Location			
Unit Letter G	1810	Feet From The North Line and 1850	Feet From The East Line
Section 35	Township 31N	Range 05W	NMPL, Rio Arriba County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒	Address (Give address to which approved copy of this form is to be sent)					
Meridian Oil Inc.	PO Box 4289, Farmington, NM 87499					
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)					
Northwest Pipeline Corp.	3539 E. 30th Street, Farmington, NM 87402					
If well produces oil or liquids, give location of tanks.	Unit G	Sec. 35	Twp. 31N	Rgn. 05W	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 09/26/90	Date Compl. Ready to Prod. 04/24/91	Total Depth 3570'	P.B.T.D.					
Elevations (DF, RKB, RT, GR, etc.) 6726' GL	Name of Producing Formation Fruitland Coal	Top Oil/Gas Pay 3441'	Tubing Depth 3552'					
Perforations 3441-3568'	Pre-perforated Liner		Depth Casing Shoe					
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12 1/4"	9 5/8"	223'	189 cu.ft.					
8 3/4"	7"	3420'	1735 cu.ft.					
6 1/4"	5 1/2"	3570'	did not cement					
	2 3/8"	3552'						

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
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.

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GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity or Condensate
Testing Method (press. back pr.) backpressure	Tubing Pressure (Start-in) SI 408	Casing Pressure (Start-in) SI 1448	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
Denny Bradfield
Printed Name
5-21-91
Date
326-9700
Telephone No.

OIL CONSERVATION DIVISION

Date Approved JUN 7 1991

By [Signature]
SUPERVISOR DISTRICT #3

Title _____

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) Submit form C-104 must be filed for each pool in multiphase completion wells.