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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

## OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Meridian Oil Inc.		Well API No. 30-045-21440						
A	*	0.7400						
PO Box 4289, Farm	ington, NM	87499 ———			<del></del> -			
son(s) for Filing (Check proper box)	<b>_</b>		Other	(Please expla	NR)			
well	· · · · · · · · · · · · · · · · · · ·	nasporter of:						
completion 🔀		bry Ges						
ange in Operator	Casinghead Ges C	Condensate				<del></del>		
supplies of behaviors observed.	<u> </u>	<del></del>						
DESCRIPTION OF WELL	AND LEASE							
ase Name	Well No. P	ool Name, includis				Lease		uss No.
Morris A	10	Basin F	ruitlar	id Coal		iederal gr Fee	SF-0	78138
estica	-				0		7.7	
Unit Letter K	_ :1650	Feet Prom The	outh Line	<b>ned</b> 1:	550 F	t From The	West	Line
2.2	70N	11W	J		San Jua	n		<b>6</b>
Section 22 Township	30N R	Cango III	, NIM	РМ,	Jan Jua			County
DESIGNATION OF TRANS	SPORTER OF OIL	AND NATUI	RAL GAS_					
ms of Authorized Transporter of Oil	or Condense		Address (Give			copy of this for		
Meridian Oil Inc.			O Box					
me of Authorized Transporter of Casing		r Dry Gas 🔼				copy of this for		w) 199
El Paso Natural Ga					Farmin	gton, N	11 0/4	+ 3 3
vell produces oil Or liquids, a location of tanks.	Unit   Sec.   T	7wp.   Rgs.   30   11W	is gas actually	COMMODIA!	i weer	i		
is production is commissied with that f	<del></del>	30 1211	ing order numbe	r.				
COMPLETION DATA	<u></u> ,					,		
Designation of Completion	Oil Well	Gas Well	New Well	Workover	Deepea	Plug Back S	ame Res'v	Diff Res'v
Designate Type of Completion -		X	Total Depth		<u> </u>	X [ P.B.T.D.		12
s Spudded	Date Compt. Ready to P	100.		7701			1	
3 - 0 1 - 7 4 Vanons (DF. RKB, RT. GR. etc.)	Name of Producing Form		2339 Top Oil/Gas Pay			2 19 5 Tubing Depth		
	Fruitland		199			2175	1	
816 GL	Fluitianu	COAT	100.	<u>-</u>		Depth Casing		
995-98 <mark>',2068-76',</mark> 2	2097-21041.2	152-531.0	2158-75	.2180	- 82 '			
<u> </u>	TUBING, CASING AN		CEMENTING RECORD					
HOLE SIZE CASING &		ING SIZE	i !	DEPTH SET	· ·	SACKS CEMENT		
	0 E / 011		<u> </u>	139'			cu.f	
12 1/4"	8 5/8"							t
12 1/4" 7 7/8"	2 7/8"		1	2339		609	cu.f	
				2339 ' 2175 '		609	cu.f	
7 7/8"	2 7/8" 1 1/4"					609	cu.f	
7 7/8"  TEST DATA AND REQUES	2 7/8" 1 1/4" 5T FOR ALLOWA	BLE	be equal to or	2175'	lowable for this	:		
7 7/8"  TEST DATA AND REQUES  L WELL (Test must be after to	2 7/8" 1 1/4"	BLE	be equal to or	2175 '	ump, gas lift, e	depth or be foi	r full 24 hou	
7 7/8"  TEST DATA AND REQUES L WELL Test must be after to	2 7/8" 1 1/4"  ST FOR ALLOWA	BLE	be equal to or o	2175 '	ump, gas lift, e	depth or be for	full 24 hora	
7 7/8"  TEST DATA AND REQUES  L WELL Test must be after re te First New Oil Run To Tank	2 7/8" 1 1/4"  ST FOR ALLOWA	BLE	be equal to or o	2175 '	ump, gas lift, e	depth or be for	full 24 hora	
7 7/8"  TEST DATA AND REQUES  L WELL Test must be after re te First New Oil Run To Tank	2 7/8" 1 1/4"  ST FOR ALLOWA  recovery of total volume of Date of Test	BLE	Producing Med	2175 '	ump, gas lift, e	depth or be for	full 24 hove	
7 7/8"  TEST DATA AND REQUES  L WELL Test must be after re te First New Oil Run To Tank  agin of Test	2 7/8" 1 1/4"  ST FOR ALLOWA  recovery of total volume of Date of Test	BLE	Producing Me	2175 '	ump, gas lift, e	depth or be for	full 24 hove	
7 7/8"  TEST DATA AND REQUES  L WELL (Test must be after re te First New Oil Run To Tank  again of Test	2 7/8" 1 1/4"  TFOR ALLOWA  ecovery of total volume of Date of Test  Tubing Pressure	BLE	Producing Med	2175 '	ump, gas lift, e	depth or be for	full 24 hou	<b>3.</b> )
7 7/8"  TEST DATA AND REQUES L WELL Test must be after re the First New Oil Run To Tank  again of Test  cant Prod. During Test	2 7/8" 1 1/4"  TFOR ALLOWA  ecovery of total volume of Date of Test  Tubing Pressure	BLE	Producing Med Casing Pressur Water - Bbls.	2175 ' exceed top all shod (Flow, p	ump, gas lift, e	child Size	6 199U	<b>3.</b> )
7 7/8"  TEST DATA AND REQUES L WELL Test must be after re the First New Oil Run To Tank  again of Test  cant Prod. During Test	2 7/8" 1 1/4"  TFOR ALLOWA  ecovery of total volume of Date of Test  Tubing Pressure	BLE	Producing Med	2175 ' exceed top all shod (Flow, p	ump, gas lift, e	depth or be for	6 199U	<b>3.</b> )
7 7/8"  TEST DATA AND REQUES L WELL (Test must be after re the First New Oil Run To Tank  agth of Test  Tank  Test Medical Test  Test WELL  Test Frod. Test - MCF/D	2 7/8" 1 1/4"  T FOR ALLOWA  ecovery of total volume of Date of Test  Tubing Pressure  Oil - Bbls.	BLE fload oil and must	Producing Medical Casing Pressur Water - Bbis. Bbis. Condens	2 175 ' exceed top all hod (Flow, p	ump, gas lift, e	child Size	6 199U	<b>3.</b> )
TEST DATA AND REQUES L WELL (Test must be after re te First New Oil Run To Tank  again of Test  suni Prod. During Test  AS WELL  suni Prod. Test - MCF/D  ting Method (piest, back pr.)	2 7/8" 1 1/4"  TFOR ALLOWA  ecovery of total volume of Date of Test  Tubing Pressure  Oil - Bbls.	BLE fload oil and must	Producing Med Casing Pressur Water - Bbls.	2175 ' exceed top elimbol (Flow, p	ump, gas lift, e	Checks Size  Checks Size  Checks Size  Checks Size  Checks Size	6 199U	<b>3.</b> )
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TEST DATA AND REQUES  IL WELL (Test meet be after re  the First New Oil Run To Tank  right of Test  Clust Prod. During Test  Clust Prod. Test - MCF/D  sting Method (pitet, back pr.)  backpressure  I. OPERATOR CERTIFIC  1 hereby certify that the rates and regulat  Division have been complied with and	2 7/8" 1 1/4" 1 1/4"  ST FOR ALLOWA  ecovery of total volume of Date of Test  Tubing Pressure Oil - Bbls.  Leagth of Test  SI 550  CATE OF COMP! Intions of the Oil Conserved that the information given	BLE f load oil and must	Producing Medical Casing Pressure  Bbls. Condens  Casing Pressure  SI	2175 Lexicad top all hold (Flow, p	NSERV	Choke Size  Choke Size  Choke Size  Choke Size	0 1930 N. DI	<b>3.)</b>
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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 samet be filled for each pool in multiply completed wells.