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

State of New Mexico
Energy, Minerais and Natural Resources Department

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

## OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT II
P.O. Drawer DD, Artesia, NM \$8210
DISTRICT III

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator							Well A	PI No.	<del></del>		
Meridian Oil Inc.							•				
Address											
P. O. Box 4289, Farmi	ngton,	<u>NM</u> 8	7499								
Reason(s) for Filing (Check proper box)			_		Othe	t (Please expiai	R)				
New Well	0.1	Change in		- <del></del>	E C C						
Recompletion	Oil Carinebas	40	Dry Ga	- =	Eff	ective 1	1/1/91				
Change in Operator	Casinghea	1085	Conde							<del></del>	
and address of previous operator				T				· · · · · · · · · · · · · · · · · · ·			
IL DESCRIPTION OF WELL A	AND LE	ASE									
Lease Name		Well No.   Pool Name, Including			ng Formation		Kind o	Kind of Lease No.			
Quinn		6A	Bas	in Dako	ota .		State,	Federal or Fee	SF078	511	
Location	000					200					
Unit Letter P	. 990	<u> </u>	. Feet Fr	room The $\frac{50}{}$	outh	990	_ Fe	et From The	ast	Line	
Section 20 Township	31N	.1	_	8 <b>k</b>	ı	San	Juan			_	
Section 20 Township	, 311	<del></del>	Range	ON	<u> </u>	San	Juan			County	
III. DESIGNATION OF TRANS	SPORTE	R OF O	II. AN	D NATE	RAI. GAS						
Name of Authorized Transporter of Oil	<u>JI OKIL</u>	or Conden	_	D INATO		eddress to whi	ch approved	copy of this form	1 15 10 be se	RE)	
Meridian Oil Inc.	٠				P. O. E	Sox 4289,	Farmir	gton, NM	87499		
Name of Authorized Transporter of Casing			or Dry	Gas 📉				copy of this form		ns)	
Sunterra Gas Gatherin	<u>ig Comp</u>	any			P. O. E	Box 1899,	<u>Bloomf</u>	ield, NM	87413		
If well produces oil or liquids, give location of tanks.	Unit Sec.		Twp. Rge.		Is gas actually connected?		When	When?			
		L					L				
If this production is commingled with that fi IV. COMPLETION DATA	rom any ou	ret terms of	boor, gr	ve commingi	ring occes, prime	er:				······································	
		Oil Well		Gas Well	New Well	Workover	Deepen	Plug Back S	me Resiv	Diff Res'v	
Designate Type of Completion -	- (X)		i				200pag				
Date Spudded	Date Com	pi. Ready to	Prod.		Total Depth	L	· · · · · · · · · · · · · · · · · · ·	P.B.T.D.			
					!						
Elevations (DF, RKB, RT, GR, etc.)	Name of P	Name of Producing Formation				Top Oil/Gas Pay			Tubing Depth		
Perforations	<u> </u>							Doorb Cooise	Mar.		
1 Grown and 1								Depth Casing S	SHOE		
	<del></del>	TIRING	CASI	NC AND	CEMENTI	VG RECORT	<u> </u>	<u> </u>			
HOLE SIZE		TUBING, CASING AND CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT		
					i						
I TROTT DATE AND DECAUSE	1							1			
		L I OTT						~			
							bla fan shi	- dansh an ha fan	6.11 24 have	1	
OIL WELL Test must be after re	ecovery of u	otal volume							full 24 hou	ra.)	
		otal volume				exceed top allo			full 24 hou	73.)	
OIL WELL (Test must be after re Date First New Oil Run To Tank	ecovery of u	otal volume				ethod (Flow, pur			full 24 hou	rs.)	
OIL WELL (Test must be after re Date First New Oil Run To Tank	Date of Te	otal volume			Producing Me	ethod (Flow, pur		9	full 24 hou		
OIL WELL (Test must be after re Date First New Oil Run To Tank	Date of Te	otal volume			Producing Me	ethod (Flow, pur		Choke Size	* 1		
OIL WELL Test must be after re Date First New Oil Run To Tank  Length of Test	Date of Te Tubing Pre	otal volume			Producing Mo	ethod (Flow, pur		Choke Size	* 1		
OIL WELL Test must be after re Date First New Oil Run To Tank  Length of Test	Date of Te Tubing Pre	otal volume			Producing Mo	ethod (Flow, pur		Choke Size N ) V Gas- MCF	* 1		
OIL WELL Test must be after re Date First New Oil Run To Tank  Length of Test  Actual Prod. During Test	Date of Te Tubing Pre	otal volume est			Producing Mo	ethod ( <i>Flow, pu</i> ure		Choke Size N ) V Gas- MCF	(53		
Date First New Oil Run To Tank  Length of Test  Actual Prod. During Test  GAS WELL	Date of Te  Tubing Pre  Oil - Bbls.	otal volume est			Producing Mo Casing Press. Water - Bbis. Bbis. Conden	ethod (Flow, pur		Choke Size  N ) V  Gas- MCF  Gravity of Cor	(53		
OIL WELL (Test must be after re Date First New Oil Run To Tank  Length of Test  Actual Prod. During Test  GAS WELL  Actual Prod. Test - MCF/D	Date of Te  Tubing Pre  Oil - Bbls.	otal volume est	of load		Producing Me Casing Press. Water - Bbis.	ethod (Flow, pur		Choke Size N ) V Gas- MCF	(53		
OIL WELL (Test must be after re Date First New Oil Run To Tank  Length of Test  Actual Prod. During Test  GAS WELL  Actual Prod. Test - MCF/D  Testing Method (pilot, back pr.)	Date of Te Date of Te Tubing Pre Oil - Bbls. Length of	otal volume est essure Test	of load	oil and must	Producing Mo Casing Press. Water - Bbis. Bbis. Conden	ethod (Flow, pur		Choke Size  N ) V  Gas- MCF  Gravity of Cor	(53		
OIL WELL (Test must be after re Date First New Oil Run To Tank  Length of Test  Actual Prod. During Test  GAS WELL  Actual Prod. Test - MCF/D	Date of Te Date of Te Tubing Pre Oil - Bbls. Length of	otal volume est essure Test	of load	oil and must	Producing Me Casing Press Water - Bbis. Bbis. Conden Casing Press	ethod (Flow, pur	np, gas lift, i	Gravity of Co	(S)	1,	
OIL WELL (Test must be after red Date First New Oil Run To Tank  Length of Test  Actual Prod. During Test  GAS WELL  Actual Prod. Test - MCF/D  Testing Method (pitot, back pr.)  VI. OPERATOR CERTIFIC.  I hereby certify that the rules and regular	Date of Te Date of Te Tubing Pre Oil - Bbls. Length of Tubing Pre	est ressure  Test ressure (Shu	of load  R-in)  PLIA	oil and must	Producing Me Casing Press Water - Bbis. Bbis. Conden Casing Press	ethod (Flow, pur	np. gas lift, d	Gravity of Co	(SA)	1,	
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OIL WELL (Test must be after red) Date First New Oil Run To Tank  Length of Test  Actual Prod. During Test  GAS WELL  Actual Prod. Test - MCF/D  Testing Method (pitot, back pr.)  VI. OPERATOR CERTIFIC. I hereby certify that the rules and regulated Division have been complied with and to	Date of Te Date of Te Tubing Pre Oil - Bbls. Length of Tubing Pre ATE OF	otal volume est essure Test essure (Shu F COME e Oil Conse	of load  R-in)  PLIA	oil and must	Producing Me Casing Press Water - Bbis. Bbis. Conden Casing Press	ethod (Flow, pur	np, gas lift, d	Gravity of Co	(SA)	1,	
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OIL WELL  Test must be after re  Date First New Oil Run To Tank  Length of Test  Actual Prod. During Test  GAS WELL  Actual Prod. Test - MCF/D  Testing Method (pitot, back pr.)  VI. OPERATOR CERTIFIC  I hereby certify that the rules and regula Division have been complied with and it is true and complete to the best of my k  Signature  Les ie Kahwajy  Printed Name	Date of Te Date of Te Tubing Pre Oil - Bbls.  Length of Tubing Pre ATE OF stions of the that the info	Test  COMP  Conservation gives delicit.	e-in) PLIA PLIA rvation ven above Title	NCE	Producing Mo Casing Press Water - Bbis. Bbis. Conden Casing Press	ethod (Flow, pur ure  mus/MMCF  ure (Shut-in)  OIL CON	ISERV	Gravity of Conches Size  ATION COND NOV 0 8 1	SOUVISION 991	) 1, 1, 0N	
OIL WELL (Test must be after red) Date First New Oil Run To Tank  Length of Test  Actual Prod. During Test  GAS WELL  Actual Prod. Test - MCF/D  Testing Method (pitot, back pr.)  VI. OPERATOR CERTIFIC. I hereby certify that the rules and regulate Division have been complied with and it is true and complete to the best of my king and the set o	Date of Te Date of Te Tubing Pre Oil - Bbls.  Length of Tubing Pre ATE OF stions of the that the info	Test  Comparison grand belief.  Ction  26-970	e-in) PLIA PLIA rvation ven above Title	NCE re	Producing Me Casing Press  Water - Bbis.  Bbis. Conden  Casing Press  ( Date  By	ethod (Flow, pur ure  mus/MMCF  ure (Shut-in)  OIL CON	ISERV	Gravity of Conches Size  ATION COND NOV 0 8 1	SOUVISION 991	) 1, 1, 0N	

## 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.