

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 API No. 30-045-26877  
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 EPNG Com A Well No. 300 Pool Name, including Formation Basin Fruitland Coal Kind of Lease (State, Federal or Fee) Lease No. E-1196-3  
Location Unit Letter K 1845 Feet From The South Line and 1810 Feet From The West Line  
Section 32 Township 31N 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 El Pas Natural Gas Company or Dry Gas   
Address (Give address to which approved copy of this form is to be sent) PO Box 4990, Farmington, NM 87499  
If well produces oil or liquids, give location of tanks. Unit K Sec. 32 Twp. 31N Rge. 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 04-27-89	Date Compl. Ready to Prod. 05-23-89	Total Depth 3099'	P.B.T.D.					
Elevations (DF, RKB, RT, GR, etc.) 6269' GL	Name of Producing Formation Fruitland Coal	Top Oil/Gas Pay 2885'	Tubing Depth 3076'					
Performances 2885-2922', 3009-3097' (predrilled liner)	Depth Casing Shoe 3098							
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT		
12 1/4"	9 5/8"		434'			437 cu.ft.		
8 3/4"	7"		2899'			906 cu.ft.		
6 1/4"	5 1/2"		3098'			did not cmt		
	2 3/8"		3076'					

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  
RECEIVED JUN 12 1989 OIL CON. DIV. DIST. 3

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.) backpressure	Tubing Pressure (Shut-in) 1455	Casing Pressure (Shut-in) 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 Peggy Bradfield, Regulatory Affairs  
Printed Name Title  
6-9-89 326-9727  
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved JUN 12 1989  
By Original Signed by FRANK T. CHAVEZ  
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) Separate Form C-104 must be filed for each pool in multiply completed wells.