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

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

DISTRICT III  
1000 Rio Bonito 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

|                                                                                         |                                         |                                     |
|-----------------------------------------------------------------------------------------|-----------------------------------------|-------------------------------------|
| Operator<br>Meridian Oil Inc.                                                           |                                         | Well API No.<br>30-045-27532        |
| Address<br>PO Box 4289, Farmington, NM 87499                                            |                                         |                                     |
| Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain) |                                         |                                     |
| New Well <input checked="" type="checkbox"/>                                            | Change in Transporter of:               |                                     |
| Recompletion <input type="checkbox"/>                                                   | Oil <input type="checkbox"/>            | Dry Gas <input type="checkbox"/>    |
| Change in Operator <input type="checkbox"/>                                             | Casinghead Gas <input type="checkbox"/> | Condensate <input type="checkbox"/> |
| If change of operator give name and address of previous operator                        |                                         |                                     |

II. DESCRIPTION OF WELL AND LEASE

|                                                                                                                                                                                                                             |                |                                                     |                                          |                        |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|-----------------------------------------------------|------------------------------------------|------------------------|
| Lease Name<br>Quigley                                                                                                                                                                                                       | Well No.<br>1R | Pool Name, including Formation<br>Blanco Mesa Verde | Kind of Lease<br>State, (Federal) or Fee | Lease No.<br>SF-081134 |
| Location<br>Unit Letter <u>N</u> : <u>1450</u> Feet From The <u>South</u> Line and <u>790</u> Feet From The <u>West</u> Line<br>Section <u>6</u> Township <u>30N</u> Range <u>9W</u> , <u>NMPM</u> , <u>San Juan</u> County |                |                                                     |                                          |                        |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

|                                                                                                                                                         |                                                                                                               |           |
|---------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|-----------|
| Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/><br>Meridian Oil Inc.                   | Address (Give address to which approved copy of this form is to be sent)<br>PO Box 4289, Farmington, NM 87499 |           |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/><br>El Paso Natural Gas Company | Address (Give address to which approved copy of this form is to be sent)<br>PO Box 4990, Farmington, NM 87499 |           |
| If well produces oil or liquids, give location of tanks.                                                                                                | Unit<br>N                                                                                                     | Sec.<br>6 |
|                                                                                                                                                         | Twp.<br>30                                                                                                    | Rge.<br>9 |
|                                                                                                                                                         | Is gas actually connected? <input type="checkbox"/> 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 <input type="checkbox"/>         | Gas Well <input checked="" type="checkbox"/> | New Well <input checked="" type="checkbox"/> | Workover <input type="checkbox"/> | Deepen <input type="checkbox"/> | Plug Back <input type="checkbox"/> | Same Res'v <input type="checkbox"/> | Diff Res'v <input type="checkbox"/> |
| Date Spudded<br>11-21-89                       | Date Compl. Ready to Prod.<br>01-04-90    |                                              | Total Depth<br>6000'                         |                                   | P.B.T.D.                        |                                    |                                     |                                     |
| Elevations (DF, RKB, RT, GR, etc.)<br>6523' GL | Name of Producing Formation<br>Mesa Verde |                                              | Top Oil/Gas Pay<br>4770'                     |                                   | Tubing Depth<br>5743'           |                                    |                                     |                                     |
| Performances<br>see back                       |                                           |                                              |                                              |                                   | Depth Casing Shoe               |                                    |                                     |                                     |
| TUBING, CASING AND CEMENTING RECORD            |                                           |                                              |                                              |                                   |                                 |                                    |                                     |                                     |
| HOLE SIZE                                      | CASING & TUBING SIZE                      |                                              | DEPTH SET                                    |                                   | SACKS CEMENT                    |                                    |                                     |                                     |
| 12 1/4"                                        | 9 5/8"                                    |                                              | 229'                                         |                                   | 189 cu.ft.                      |                                    |                                     |                                     |
| 8 3/4"                                         | 7"                                        |                                              | 3530'                                        |                                   | 1091 cu.ft.                     |                                    |                                     |                                     |
| 6 1/4"                                         | 4 1/2"                                    |                                              | 5999'                                        |                                   | 468 cu.ft.                      |                                    |                                     |                                     |
|                                                | 2 3/8"                                    |                                              | 5743'                                        |                                   |                                 |                                    |                                     |                                     |

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  |

GAS WELL

|                                  |                                  |                                  |                       |
|----------------------------------|----------------------------------|----------------------------------|-----------------------|
| Actual Prod. Test - MCF/D<br>223 | Length of Test                   | Bbls. Condensate/MCF             | Survey of Condensate  |
| Testing Method (pilot, back pr.) | Tubing Pressure (Shut-in)<br>140 | Casing Pressure (Shut-in)<br>460 | Choke Size<br>DIST. 3 |

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 3-1-90  
Printed Name Title  
Regulatory Affairs 326-9700  
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved MAR 26 1990

By   
Title SUPERVISOR DISTRICT #3

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.

perforations:

4770-73', 4811-14', 4860-63', 4890-97', 4905-08', 4922-24', 4951-54',  
4988-94', 5002-10', 5020-26', 5065-68' w/2 spf;  
5092-96', 5176-79', 5288-32', 5256-60', 5362-66', 5386-90', 5405-09',  
5476-80' w/2 spf;  
5516-20', 5528-30', 5538-44', 5555-62', 5574-76', 5594-97', 5606-09',  
5612-15', 5640-48', 5734-36', 5757-60', 5780-84', 5789-92', 5815-18',  
5847-50' w/2 spf