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Appropriate District Office
DISTRICT I
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

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

DISTRICT II
O. Drawer DD, Aramis, NM 88210

DISTRICT III
00 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

operator	Meridian Oil Inc.	Well API No.	30-045-28780
address	PO Box 4289, Farmington, NM 87499		
reason(s) for Filing (Check proper box)	<input checked="" type="checkbox"/> New Well <input type="checkbox"/> Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> Other (Please explain)		
new Well	<input checked="" type="checkbox"/>		
recompletion	<input type="checkbox"/>		
change in Operator	<input type="checkbox"/>		
change of operator give name	Order R-9743		
address of previous operator	Water pool# 2806107		

DESCRIPTION OF WELL AND LEASE

well Name	EPNG D Com 13711	Well No.	301	Pool Name, including Formation	Basin Fruitland Coal	Kind of Lease (State, Federal or Fee)	Lease No.
location	Unit Letter D : 1175 Feet From The North Line and 1115 Feet From The West Line Section 36 Township 30 Range 8 , NMPM, San Juan County						

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

name of Authorized Transporter of Oil	<input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)				
Meridian Oil Inc.	2806105	PO Box 4289, Farmington, NM 87499				
name of Authorized Transporter of Casinghead Gas	<input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)				
Meridian Oil Inc.	2806106	PO Box 4289, Farmington, NM 87499				
well produces oil or liquids, location of tanks.	Unit D	Sec. 36	Twp. 30	Rge. 8	Is gas actually connected?	When ?

is production is commingled with that from any other lease or pool, give commingling order number.

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					
Spudded 11-12-92	Date Compl. Ready to Prod. 2-20-93	Total Depth 2857'	P.B.T.D.					
various (DF, RKB, RT, GR, etc.) 6036' GL	Name of Producing Formation Fruitland Coal	Top Oil/Gas Pay 2674'	Tubing Depth 2817'					
formations	predrilled liner 2674-2855'		Depth Casing Shoe					

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4"	9 5/8"	234'	112 cf
8 3/4"	7"	2637'	853 cf
6 1/4"	5 1/2"	2857'	did not cmt
	2 7/8"	2817'	

TEST DATA AND REQUEST FOR ALLOWABLE

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.)

First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	RECEIVED MAR 30 1993 OIL CON. DIV. DIST. 3
Length of Test	Tubing Pressure	Casing Pressure	
Oil Prod. During Test	Oil - Bbls.	Water - Bbls.	
AS WELL			
Oil Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Flow Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
		879	

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 Reg. Rep.

Printed Name: 3-27-93 Title: 326-9700

Date: _____ Telephone No.: _____

OIL CONSERVATION DIVISION

Date Approved: March 03 1993

By: [Signature]

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.