

OIL CONSERVATION DIVISION

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

P.O. Box 2088

DISTRICT III
 1000 Rio Blanco Rd., Aztec, NM 87410

Santa Fe, New Mexico 87504-2088

**REQUEST FOR ALLOWABLE AND AUTHORIZATION
 TO TRANSPORT OIL AND NATURAL GAS**

I.

Operator: Meridian Oil Inc. Well API No. 30-045-29026

Address: PO Box 4289, Farmington, NM 87499

Reason(s) for Filing (Check proper box): New Well, Recompletion, Change in Operator. Change in Transporter of: Oil, Dry Gas, Casinghead Gas, Condensate. Other (Please explain): *Water prod 2805082*

If change of operator give name and address of previous operator: _____

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 OIL CON. DIV.
 DIST. 2

II. DESCRIPTION OF WELL AND LEASE

Lease Name Sullivan	Well No. LR	Pool Name, including Formation Blanco Mesa Verde	Kind of Lease State, Federal or Fee	Lease No. NM 3195A
Location				
Unit Letter A	: 1190	Feet From The North	Line and 1190	Feet From The East
Section 7	Township 30	Range 10	, NMPM, San Juan County	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil Meridian Oil Inc.	<input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	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 Meridian Oil Inc.	<input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) PO Box 4289, Farmington NM 87499				
If well produces oil or liquids, give location of tanks.	Unit A	Sec. 7	Twp. 30	Rgn. 10	Is gas actually connected?	When?

If this production is commingled with that from any other leases 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 11-28-93	Date Compl. Ready to Prod. 12-21-93	Total Depth 5504		P.B.T.D.				
Elevation (DF, RKB, RT, GR, etc.) 6205'	Name of Producing Formation Mesa Verde	Top Oil/Gas Pay 3544		Tubing Depth 5377				
Perforations 3544-3562', 4363-4978', 5028-5315'							Depth Casing Shoe	

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4"	9 5/8"	220'	236 cu.ft.
8 3/4"	7"	3243'	938 cu.ft.
6 1/4"	4 1/2"	3093-5504'	494 cu.ft.
	2 3/8"	5377'	

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 3232	Length of Test 3 hrs	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (post, back pr.) backpressure	Tubing Pressure (Shut-in) 236	Casing Pressure (Shut-in) 726	Choke Size 3/4"

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.

Peggy Bradfield
 Signature
 Peggy Bradfield Regulatory Rep.
 Printed Name
 Title
 2-5-94
 Date
 326-9700
 Telephone No.

OIL CONSERVATION DIVISION

Date Approved FEB 14 1994
 Original Signed by CHARLES STOLSON
 By _____
 Title DEPUTY OIL & GAS SUPERVISOR, DIST. 40

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- All sections of this form must be filled out for allowable on new and recompleted wells.

