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

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

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

I.	1	TO TRA	NSF	PORT OIL	AND NA	TUR/	AL GA	S				
penior								Well API No.				
Meridian Oil Inc.						_						
P. 0. Box 4289, Farm	ington,	, NM	8749	99								
Reason(s) for Filing (Check proper box)			_		Oth	et (Plea	se expia	in)				
New Well		Change in	-									
Recompletion	Oil Casinghead	.c	Dry C									
If change of operator give name	Campian	(GES	C000						·			
and address of previous operator	· · · · · · · · · · · · · · · · · · ·								 			
IL DESCRIPTION OF WELL	AND LEA	SE										
Lease Name		Well No.	Pool	Name, Includi					of Lease No.			
Lawson		1R	anco Mes	averde State,				Federal or Fee SF-078040A				
Location	1150											
Unit Letter N	: 1150 Feet From The South Line and 1670 Feet From The West Line										Line	
Section 12 Township 31N Range 11W NMPM, San Juan County												
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS												
Name of Authorized Transporter of Oil or Condensate X Address (Give address to which approved copy of this form is to be sent)												
Meridian Oil Inc.	P. O. Box 4289, Farmington, NM 87499											
Name of Authorized Transporter of Casing			or Dry Gas 💢		Address (Give address to which appr							
Sunterra Gas Gatheri	 		10		,	_			ield, N	M 87413		
If well produces oil or liquids, give location of tanks.	Unait	Sec.	Twp. Ι	Kge.	Is gas actuali	у сопле	cted?	When	?			
If this production is commingled with that f	rom any othe	r lease or	pooi, e	ive commind	ing order num	her		<u> </u>				
IV. COMPLETION DATA	,		Land, 9									
Designate Type of Completion -	· (X)	Oil Well		Gas Well	New Well	Work	over	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Spudded	Date Compi. Ready to Prod.				Total Depth				P.B.T.D.			
			, , , , ,						F.B.1.D.			
Elevations (DF, RKB, RT, GR, etc.)	F, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas Pay				Tubing Depth		
Perforations						Depth Casing Shoe						
:												
TUBING, CASING AND												
HOLE SIZE	CAS	ING & TL	SIZE	DEPTH SET				SACKS CEMENT				
												
V. TEST DATA AND REQUES	T FOR A	LLOW	ABLI	Ē								
OIL WELL (Test must be after re	·		of load	oil and must					W-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	forfall to had	W C IN	
Date First New Oil Run To Tank	Date of Tes	t			Producing M	ethod (F	low, pur	np, gas lift, d	ic.	W las it	T 39	
Length of Test Tubing Pressure					Casing Pressure				Children		201	
					Caning Pressure					OV2219	391.	
Actual Prod. During Test	Oil - Bbls.				Water - Bbls.				Gar-MGH CON DIV			
									OIL COINT			
GAS WELL				•						्रिश्चाः		
Actual Prod. Test - MCF/D	Length of Test				Bbls. Condensate/MMCF				Gravity of (Gravity of Condensate		
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)				Choke Size			
VI. OPERATOR CERTIFIC.	ATE OF	COMP	T I A	NCF	1				1			
I hereby certify that the rules and regulations of the Oil Conservation						OIL CONSERVATION DIVISION						
Division have been complied with and that the information given above						NOV 2 2 1991						
is true and complete to the best of my knowledge and belief.						App	rove					
Festix Kahwani						3 de						
Signature						Bv						
Leslie Kahwajy Production Analyst Printed Name Title						SUPERVISOR DISTRICT #3						
11/21/91	505-	326-97	700		Title				· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		
Date			phone	No.					<u> </u>			

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.