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Appropriate District Office
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DISTRICT III
1000 Rio Brazos 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 Meridian Oil Inc.	Well API No.
Address PO Box 4289, Farmington, NM 87499	
Reason(s) for Filing (Check proper box) ☐ Other (Please explain)	
New Well ☐	Change in Transporter of:
Recompletion ☒	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 Ute	Well No. 6	Pool Name, including Formation Barker Creek Paradox	Kind of Lease State, Federal or Fee	Lease No. I-22-IND-2772
Location Unit Letter M Section 17 Township 32N Range 14W NMPM San Juan County Feet From The South Line and 1000 Feet From The West Line				

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 Western Gas Processor	or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent) PO Box 70, Kirtland, NM 87417				
If well produces oil or liquids, give location of tanks.	Unit M	Sec 17	Twp 32N	Rge 14W	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 10-26-50	Date Compl. Ready to Prod. 08-12-91	Total Depth 8993' 8995'	P.B.T.D. 8405'					
Elevations (DF, RKB, RT, GR, etc.) 6211' GL 6186' GL	Name of Producing Formation Paradox	Top Oil/Gas Pay 8120'	Tubing Depth 8634' 8510'					
Perforations 8120-70', 8440-80' w/4 spf			Depth Casing Shoe					

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17"	13 3/4"	343'	240 sx
12 1/4"	9 5/8"	2668'	910 sx
8 3/4"	7"	8993'	3000 sx 1500
	2 7/8"	8634' 8510'	

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.)	RECEIVED AUG 05 1992 OIL CON. DIV DIST. 3
Length of Test	Tubing Pressure	Casing Pressure	
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	
Gas - MCF			

GAS WELL

Actual Prod. Test - MCF/D 11	Length of Test 3 hrs	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (puot, back pr.) backpressure	Tubing Pressure (Shut-in) 3060	Casing Pressure (Shut-in) 1032	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.

Signature
Peggy Bradfield
Reg. Affairs
Printed Name
10-23-91
Date
Title
326-9700
Telephone No.

OIL CONSERVATION DIVISION

Date Approved AUG 05 1992

By Brian J. Chang
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.