Submit 5 Copies Appropriate District Office <u>DISTRICT I</u> P.O. Box 1980, Hobbs, NM 88240 <u>DISTRICT II</u> P.O. Drawer DD, Artesia, NM 88210 V DISTRICT III	Energy, Minerais and Ni OIL CONSERV P.O. 1	New Mexico atural Resources Department ATION DIVISION Box 2088 Mexico 87504-2088	Form C-104 Revised 1-1-99 See Instructions at Bottom of Page
000 Rio Brazos Rd., Aztec, NM 87410		ABLE AND AUTHORIZATIO	
Operator	/		Well API No.
Meridian Oil In	IC. /		30-005-62658
	, Midland, Texas 7970	5	
lesson(s) for Filing (Check proper box)		Other (Please explain)	
	Change in Transporter of: Oil Dry Gas		
Change in Operator	Casinghead Gas Condensate		
change of operator give name ad address of previous operator			
L DESCRIPTION OF WELL	AND LEASE		
case Name	Well No. Pool Name, inch 1 Wildcat		Kind of Lease No. Kink Federal XX Kex NM-64489
Cannonball Federal			
Unit LetterN	: Feet From The	South Line and 2180	Feet From TheLine
Section 7 Township	14 0 00 5		Chaves County
Section / iownanij	5 14 5 Kange 20 L	, NMPM,	Citaves <u>County</u>
	SPORTER OF OIL AND NAT		
iams of Authorized Transporter of Oil	or Condensate	Address (Give address to which app	roved copy of this form is to be sent)
ame of Authorized Transporter of Casing	thead Gas 📄 or Dry Gas 💢	Address (Give address to which app	roved copy of this form is to be sent)
Unknown Well Shut			
f well produces oil or liquids, ve location of tanks. NA	Unit Sec. Twp. Rg		When?
this production is commingled with that !	from any other lease or pool, give commin	No - Shut In	
V. COMPLETION DATA			
Designate Type of Completion	- (X) Gas Well	New Well Workover Dee	pen Plug Back Same Res'v Diff Res'v
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
12/26/88	01/21/89	8450 ' Top Oil/Gas Pay	8404 '
levations (DF, RKB, RT. GR, etc.) 3531.5' GR	Name of Producing Formation Strawn- Atoka	7730' 7756	Tubing Depth 7617'
erforations			Depth Casing Shoe
7756 - 69'; 80	$\frac{014 - 31'}{7}$		8450'
HOLE SIZE	CASING & TUBING SIZE	D CEMENTING RECORD	SACKS CEMENT
17 1/2"	13 3/8"	314'	325 sx - Surface
12 1/4"	8 5/8"	1800'	950 sx - Surface
7_7/8"	4 1/2"	8450'	<u>750 sx - TOC 6380'</u>
. TEST DATA AND REQUES			·
IL WELL (Test must be after n	ecovery of total volume of load oil and m	ist be equal to or exceed top allowable f	for this depth or he for full 24 hours.)
	· · · · · · · · · · · · · · · · · · ·		
	Date of Test	Producing Method (Flow, pump, gas	
ats First New Oil Run To Tank	· · · · · · · · · · · · · · · · · · ·		
ante First New Oil Run To Tank ength of Test	Date of Test Tubing Pressure	Producing Method (Flow, pump, gas Casing Pressure	s lift, etc.) Choke Size
ate First New Oil Run To Tank ength of Test	Date of Test	Producing Method (Flow, pump, gas	s lift, etc.)
ate First New Oil Run To Tank ength of Test actual Prod. During Test	Date of Test Tubing Pressure	Producing Method (Flow, pump, gas Casing Pressure	s lift, etc.) Choke Size
ate First New Oil Run To Tank ength of Test Actual Prod. During Test GAS WELL Actual Prod. Test - MCF/D	Date of Test Tubing Pressure	Producing Method (Flow, pump, gas Casing Pressure	Gravity of Condensate
ate First New Oil Run To Tank ength of Test actual Prod. During Test GAS WELL actual Prod. Test - MCF/D 114	Date of Test Tubing Pressure Oil - Bbls. Length of Test 1	Producing Method (Flow, pump, gas Casing Pressure Water - Bbls. Bbls. Condensate/MMCF	Gravity of Condensate
ate First New Oil Run To Tank ength of Test .ctual Prod. During Test GAS WELL .ctual Prod. Test - MCF/D 114 setting Method (pitot, back pr.)	Date of Test Tubing Pressure Oil - Bbls. Length of Test 1 Tubing Pressure (Shut-in)	Producing Method (Flow, pump, gas Casing Pressure Water - Bbls. Bbls. Condensate/MMCF 0 Casing Pressure (Shut-in)	Gravity of Condensate
Ante First New Oil Run To Tank ength of Test Actual Prod. During Test GAS WELL Actual Prod. Test - MCF/D 114 esting Method (picot, back pr.) Back Pressure	Date of Test Tubing Pressure Oil - Bbls. Length of Test 1 Tubing Pressure (Shut-in) 1342 ATE OF COMPLIANCE ations of the Oil Conservation that the information gives above	Producing Method (Flow, pump, gas Casing Pressure Water - Bbls. Bbls. Condensate/MMCF 0 Casing Pressure (Shut-in) 0 OIL CONSE	Gas- MCF Gas- MCF Gravity of Condensate 0 Choke Size 18/64 RVATION DIVISION
Date First New Oil Run To Tank Length of Test Actual Prod. During Test GAS WELL Actual Prod. Test - MCF/D 114 Costing Method (pitot, back pr.) Back Pressure VL OPERATOR CERTIFIC I hereby certify that the rules and reguli Division have been complete to the best of my h	Date of Test Tubing Pressure Oil - Bbls. Length of Test 1 Tubing Pressure (Shut-in) 1342 ATE OF COMPLIANCE ations of the Oil Conservation that the information given above knowledge and belief.	Producing Method (Flow, pump, gas Casing Pressure Water - Bbls. Bbls. Condensate/MMCF 0 Casing Pressure (Shut-in) 0 OIL CONSE Date Approved	Gas-MCF Gas-MCF Gravity of Condensate 0 Choke Size 18/64 RVATION DIVISION
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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.

All sections of this form must be filled out for allowable on new and recompleted wells.
 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.

	State of New Mexico Form C Energy, Minerals and Natural Resources Department Revised RECEIVED See Int						
O. Box 1980, Hobbs, NM 88240	OIL CONSERV	ATION DIVISION	at Bottom of Page				
ISTRICT II O. Drawer DD, Artesia, NM 88210	V P.O. B	P.O. Box 2088 AHC 21 '89					
ISTRICT III 000 Rio Brazos Rd., Aziec, NM 874		lexico 87504-2088 HUU 2					
	REQUEST FOR ALLOWA	BLE AND AUTHORIZATIO	A, OFFICE				
Meridian Oil	Inc./		ell API No. 0-005-62658				
ddress 21 Desta Driv							
Leason(s) for Filing (Check proper bo		Other (Please explain)					
iew Well X	Change in Transporter of: Oil Dry Gas						
hange in Operator	Casinghead Gas Condensate						
change of operator give name d address of previous operator		· · · · · · · · · · · · · · · · · · ·					
. DESCRIPTION OF WEI	LL AND LEASE						
Cannonball Federa	Well No. Pool Name, includ		ind of Lease Lease No. KK Federal XX KX NM-64489				
Califondani Federa	<u> </u>						
Unit LetterN	:1060 Feet From The	South Line and 2180	_ Feet From The West Lin				
Section 7 Tow	nahip 14 S Range 28 E	. NMPM.	Chaves County				
<u></u>		, i dvii ivi,					
I. DESIGNATION OF TR lame of Authorized Transporter of O	ANSPORTER OF OIL AND NAT	JRAL GAS Address (Give address to which appro	med come of this form is to be part)				
iame of Authorized Transporter of C		Address (Give address to which appro	oved copy of this form is to be sent)				
Unknown - Well Sh well produces oil or liguide.		L is gas actually connected? W	Then ?				
· · · · ·	" Tome there is when it was		liea ?				
ve location of tanks.	A	No - Shut In					
this production is commingied with	A	No - Shut In	······				
this production is commingied with	that from any other lease or pool, give comming	giing order number:					
this production is commingied with	that from any other lease or pool, give communation	giing order number:	en Plug Back Same Res'v Diff Res'v				
this production is commingled with V. COMPLETION DATA Designate Type of Complet Date Spudded	that from any other lease or pool, give comming	giing order number: New Well Workover Deep X Total Depth	P.B.T.D.				
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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.

Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
 Separate Form C-104 must be filed for each pool in multiply completed wells.

Submit 5 Conies	State of N	ew Mexico	_		
Appropriate District Office		ural Resources Department	Form C-104 RECEIVED Revised 1-1-89		
P.O. Box 1980, Hobbs, NM 88240 DISTRICT II	OIL CONSERVA	TION DIVISION	See Instructions at Bottom of Page		
P.O. Drawer DD, Antesia, NM 88210		ox 2088 exico 87504-2088	AUG 21 '89		
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410					
I.	REQUEST FOR ALLOWAL	BLE AND AUTHORIZAT _ AND NATURAL GAS	ION. C. D. Artesia, office		
Operator		LAND NATONAL CAS	Well API No.		
Meridian Oil In	nc./	·····	30-005-62658		
21 Desta Drive	, Midland, Texas 79705				
Reason(s) for Filing (Check proper box) New Well	Change in Transporter of:	Other (Please explain)			
Recompletion	Oil Dry Gas Casinghead Gas Condensate				
If change of operator give name and address of previous operator					
IL DESCRIPTION OF WELL	AND LEASE				
Lease Name	Well No. Pool Name, includi		Kind of Lease Lease No.		
Cannonball Federal	1 Wildcat (Strawn-Atoma)	XSING Federal XX Ket NM-64489		
Unit Letter N		outh Line and 2180	Feet From The WestLine		
Section 7 Townshi	p 14 S Range 28 E	, NMPM,	Chaves		
			Cita VES County		
Name of Authorized Transporter of Oil	SPORTER OF OIL AND NATU		pproved copy of this form is to be sent)		
Name of Authorized Transporter of Casing	ghead Gas or Dry Gas X				
Unknown - Well Shut			pproved copy of this form is to be sent)		
If well produces oil or liquids, give location of tanks. NA	Unit Sec. Twp. Rge.	is gas actually connected? No - Shut In	When ?		
If this production is commungled with that I IV. COMPLETION DATA	from any other lease or pool, give commingi	ing order number:			
	Oil Well Gas Well	New Well Workover De	epen Plug Back Same Res'v Diff Res'v		
Designate Type of Completion	- (X) X Date Compi. Ready to Prod.	X Total Depth			
. 12/26/88	01/21/89	8450'	P.B.T.D . 8404 '		
Elevations (DF, RKB, RT, GR, etc.) 3531.5' GR	Name of Producing Formation Strawn- Atoka	Top Oll/Gas Pay 7730- 7756	Tubing Depth 7617'		
Perforations	· · · · · · · · · · · · · · · · · · ·	1100 1196	Depth Casing Shoe		
7756 - 69'; 80	014 - 31' TUBING, CASING AND	CEMENTING RECORD	8450'		
HOLE SIZE 17 1/2"	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
17 1/2	<u> </u>	<u>314'</u> 1800'	325 sx - Surface 950 sx - Surface		
	$\frac{4 1/2"}{2^{3/8}}$	8450'	750 sx - TOC 6380'		
V. TEST DATA AND REQUES	T FOR ALLOWABLE	7/617	J		
OIL WELL (Test must be after re Date First New Oil Run To Tank	ecovery of total volume of load oil and must Date of Test	be equal to or exceed top allowable Producing Method (Flow, pump, go			
Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
Actual Prod. During Test	Oil - Bbls.	Water - Bbis.	Gas- MCF		
GAS WELL					
Actual Prod. Test - MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate		
114 Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size 1 0		
Back Pressure	1342	0	Choke Size 18/64		
VI. OPERATOR CERTIFIC. I hereby certify that the rules and regula		OIL CONSE	RVATION DIVISION		
Division have been complied with and t is true and complete to the best of my k	hat the information given above				
		Date Approved			
Signature	adshaw	Ву			
Robert L. Bradshaw,	, Sr. Staff Env/Reg Spec				
8/10/89	(915) 686-5678	Title	<u> </u>		
Date	Telephone No.				

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 Separate Form C-104 must be filed for each pool in multiply completed wells.

rit 5 Conies opnate District Office	Energy, N		New Mexico atural Resources Departr	nent #FCRIVED	Form C-104 Review 1-1-89
RICT I Box 1980, Hobbs, NM 88240 RICT II Drawer DD, Ariesia, NM 88210 V		Energy, Minerals and Natural Resources Department FFCEIVEO OIL CONSERVATION DIVISION P.O. Box 2088 AUG 21 '89			See Instructions at Bottom of Page
RICT III	Sa		Mexico 87504-2088		
Rio Brazos Rd., Aziec, NM 87410	REQUEST FO	OR ALLOWA	ABLE AND AUTHOR	IZATIONA, OFFICE	•
Meridian Oil In				Well API No. 30-005-6265	<u> </u>
				30-003-0203	
21 Desta Drive, m(s) for Filing (Check proper box)	Midland, Te	exas 7970	5 Other (Please exp	(nin)	
Well X	ou 🗌	Transporter of: Dry Gas			
ge in Operator	Casinghead Gas	Condensate			
dress of previous operator					••••••••••••••••••••••••••••••••••••••
ESCRIPTION OF WELL A		Pool Name, inclu	ding Formation	Kind of Lease	Lease No.
Cannonball Federal	1	Wildcat	(Strawn- Atoka)	XSINK Federal XX Ke	MM-64489
Unit Letter N	. 1060	Feet From The _	South Line and	2180 Feet From The	West
-7	14 5				
Section / Township	<u>14 S</u>	Range 28 E	, NMPM,	Chave	S County
DESIGNATION OF TRANS					
	or Coadea		Address (Crive address to v	whick approved copy of this fe	xm is to be sent)
of Authorized Transporter of Casing		or Dry Gas	Address (Give address to w	which approved copy of this fo	m is to be sent)
<u>Inknown - Well Shut</u>	In Unit Sec.	Two. Re	. is gas actually connected?	When ?	
stion of tanks. NA			No - Shut In		
oduction is commungled with that for OMPLETION DATA	Oil Well	Gas Well	ling order number:	Deepen Plug Back	Same Res'v Diff Res'v
gnate Type of Completion -	(X) Date Compi. Ready to	Prod.	Total Depth		
12/26/88	01/21/89	TIOL	8450'	P.B.T.D.	8404'
(<i>DF. RKB, RT. GR, etc.</i>) 3531.5' GR	Name of Producing Fo Strawn- Ato		Top Oil/Gas Pay	Tubing Dept	h
7756 - 69'; 80		Ka	₹730' <u>775</u> ¢	Depth Casin 845	g Shoe
		·	CEMENTING RECORD	· · · · · · · · · · · · · · · · · · ·	
HOLE SIZE	CASING & TU 13 3/8"	BING SIZE	<u>DEPTH SET</u> 314'		SACKS CEMENT
12 1/4"	8 5/8"		1800'		- Surface
_7 7/8"	4 1/2"		8450'	750 sx	- TOC 6380'
ATA AND REQUES	21/8 T FOR ALLOWA		7617		
(Test must be after re			st be equal to or exceed top al		or full 24 hours.)
[,] Oil Run To Tank	Date of Test		Producing Method (Flow, p	ump, gas lift, etc.)	
	Tubing Pressure		Casing Pressure	Choke Size	
ring Test	Oil - Bbls.		Water - Bbis.	Gas- MCF	
- MCF/D	Length of Test		Bbis. Condensate/MIMCF	Gravity of C	
	1		0		0
i <i>loi, back pr.)</i> 'essure	Tubing Pressure (Shut- 1342	in)	Casing Pressure (Shut-in)	Choke Size	18/64
OR CERTIFICA				i	/ 04
that the rules and regular sen complied with and th	tions of the Oil Conserv hat the information give	ation	OIL COI	NSERVATION I	DIVISION
iete to the best of my know	a character and belief.		Date Approve	ed	
L. Bradshaw,	Sr. Staff Er	nv/Reg Spe	с. Ву		
		Title	11		

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

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