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

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

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

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

I.	7	TO TRAI	NSPORT OI	L AND NA	TURAL G					
Operator			Well	30-025-24702						
METEOR DEVE		30-023-275-2								
511 16th St	reet S	uita 40	n Denver	CU 803	02					
Reason(s) for Filing (Check proper box)	1000	u i cc 40	o, penier	00	es (Please exp	lain)			· · · · · · · · · · · · · · · · · · ·	
New Well			ransporter of:							
Recompletion	Oil		Ory Gas 📙							
Change in Operator (A)		Gas []			ive Sept			- 60 00	0202	
and address of operator give name BOL	deaux Po	etroleu	m Co., 51	1 16th 2	treet, 5	uite 40	u, penve	er, to a	UZUZ	
II. DESCRIPTION OF WELL	AND LEA	SE								
Lease Name Well No. Pool Name, Includi							of Lease No.			
Santa Fe Pacific		11	Crossroa	ds Silur	o Devoni	an State	Federal or Fe			
Location			`*							
Unit Letter D	_ : <u> 990</u>	F	Feet From The N Line and 380 Feet From The Line							
Service 26 Terresti	. 0 5	•	26	F 17	4704				Country	
Section 26 Townshi	p 9 S	<u> </u>	tange 36	<u>E</u> , N	МРМ,	Lea			County	
III. DESIGNATION OF TRAN	SPORTER	OF OIL	AND NATU	RAL GAS						
Name of Authorized Transporter of Oil		or Condensa			e address to w	hich approved	l copy of this j	form is to be se	int)	
Mobil Pipe Line Compa		XX •	r Dry Gas		Box 90					
Name of Authorized Transporter of Casin	Address (Giv	Address (Give address to which approved copy of this form is to be sent)								
Marren Petroleum Company If well produces oil or liquids, Unit Sec. Twp. Rge.					P.O. Box 1589, Tulsa OK 74102					
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When ? Yes March 20 1973									
If this production is commingled with that	from any othe	23	9 36		ber:		nai Cii Zu	13/3		
IV. COMPLETION DATA	,									
D :	an	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion - (X)				1		<u> </u>	<u> </u>	<u> </u>	1	
Date Spudded	Date Compl.	Date Compl. Ready to Prod.			Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation				Top Oil/Gas Pay			Tubing Depth			
and the training and and the training training								rusing Depui		
Perforations								Depth Casing Shoe		
	CEMENTI		D							
HOLE SIZE	CASING & TUBING SIZE			DEPTH SET			SACKS CEMENT			
	<u> </u>			ļ <u> </u>			 			
	ļ	······································								
	 		· · · · · · · · · · · · · · · · · · ·		··					
V. TEST DATA AND REQUES	T FOR AL	LOWAE	LE	1			J			
OIL WELL (Test must be after re				be equal to or	exceed top allo	wable for this	depth or be j	for full 24 hour	s.)	
Date First New Oil Run To Tank	Date of Test			Producing Me	thod (Flow, pu	mp, gas lift, e	Ic.)	.		
	Chala Sin									
gth of Test Tubing Pressure				Casing Pressure			Choke Size	Choke Size		
ctual Prod. During Test Oil - Bbls.				Water - Bbis.			Gas- MCF			
the same same	Water - Boile									
GAS WELL	<u> </u>			L						
Actual Prod. Test - MCF/D	Length of Te	st .		Bbls. Condens	ate/MMCF		Gravity of C	ondensate		
esting Method (pitot, back pr.) Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size			
							<u> </u>			
VI. OPERATOR CERTIFICA	ATE OF (COMPLI	IANCE			OFDV	. TION	38/1010	. 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				1001						
is true and complete to the best of my knowledge and belief.					Date Approved					
Bring M. Hatterson										
Signature				By ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR						
RRINGE M. DATTERSON FUCINEER & OPERATIONS!						i i Jinia	HUPEK VISO	ĸ		
Printed Name 9/18/91	303/57	72-1135	lie .	Title_						
Date		Telepho								

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.