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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, Artesia, NM 88210

## OIL CONSERVATION DIVISION

P.O. Box 2088

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

Santa Fe, New Mexico 87504-2088 REQUEST FOR ALLOWABLE AND AUTHORIZATION

I.		TO TR	ANS	PORT	OIL AND	NA	TURAL C	AS				
Operator Mouni dia n. Oil	T								API No.			
Meridian Oil Address	inc.			<del></del>	<del></del>				<del></del>		······································	
21 Desta Drive	e. Midlan	d. Tex	as	79705								
Reason(s) for Filing (Check proper be	ж)				X	Otl	ner (Please exp	dain)				
New Well  Recompletion	0.1	Change in Transporter of: Request for 1000 Bbls. oil test										
Change in Operator	Oil Casinghe	ad Gas	Dry (	Gas L lensate [	<u> </u>	al	lowable	- July,	1989			
change of operator give name				edisce _	- New	Per	rts: /5/	/0' <u>-84';</u>	8701	<u>-8866';</u>	9592'- 9	
nd address of previous operator								<del></del>				
I. DESCRIPTION OF WEI	LL AND LE		we	at Do	-ti			· · · · · · · · · · · · · · · · · · ·				
Bondurant Federal		1	1		luding Form O (Bone		orina)	Kind State.	of Lease Federal or Fe	ľ	Lease No.	
ocation				241141	o (bone		or ing/			NM-12	2568A	
Unit Letter I	: <u>19</u>	080	_ Feet l	From The	_South	Lin	e and	660 E	et From The	F	ast time	
Section 1 Town	10.0								æt Floin The		Line	
Section 1 1000	nship 19 So	uth	Range	<u>e 32 E</u>	<u>ast</u>	<u>, N</u>	MPM,		Le	<u>a</u>	County	
I. DESIGNATION OF TR	ANSPORTE	R OF O	IL Al	ND NAT	TURAL G	AS						
erme or varioused transporter of Of	<u>i</u>	or Conden	ente		Address	(Giv	e address to w	hich approved	copy of this	form is to be s	nent)	
Koch Uil Company	COCH Oil Company of Authorized Transporter of Casinghead Gas Y or Dry Gas					P. O. Box 3609, Midla				nd. Texas 79702		
Phillips 66 Natura			or Dry	y Gas	Address	(Giv	e address to w	hich approved	copy of this ;	form is to be s	ent)	
well produces oil or liquids,	Unit	Sec.	Twp.	l R	4()()	chuali:	enbrook, y connected?	Odessa When	Texas	79762	· · · · · · · · · · · · · · · · · · ·	
/e location of tanks.			1	1	1 3	yes		, when	12/15	783		
this production is commingled with the COMPLETION DATA	uat from any oth	er lease or	pool, gi	ive commi	ngiing order	numi	рег:					
		Oil Well		Gas Well	New \	X/-U	Wadana	<u></u>	_	,		
Designate Type of Completion	on - (X)	]	i	Our Well	New \	V CII	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
ste Spudded	Date Comp	Date Compl. Ready to Prod.				Total Depth			P.B.T.D.	L		
vations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas Pay							
levations (DF, RKB, RT, GR, etc.)  Name of Producing Formation  erforations					Top Oil	Top Old Gas Fay				Tubing Depth		
									Depth Casing Shoe			
······································										B 21100		
HOLE SIZE	T	TUBING, CASING AND										
HOLE SIZE	CAS	CASING & TUBING SIZE				DEPTH SET				SACKS CEMENT		
					_							
							<del></del>					
TEST DATA AND REQUI	FCT FOR A	LLOWA	<del></del>		_i						<del>-</del> · <u></u> .	
te First New Oil Run To Tank Date of Test					st be equal to or exceed top allowable for this depth or be for full 24 hours.)  Producing Method (Flow, pump, gas lift, etc.)							
4 (7)								7 . 6 3 - 7	,			
ngth of Test	Tubing Pres	sure			Casing P	ressui	e		Choke Size			
tual Prod. During Test	Prod. During Test Oil - Bbls.				Water - Bbis				Gas- MCF			
						, O. I.			OZS- MICE			
AS WELL							-					
nual Prod. Test - MCF/D	Length of Te	est		<del></del>	Bbls. Cor	idens	ite/MMCF		Gravity of C	Ondeneste		
ing Method (wifes heat)												
ing Method (pitot, back pr.)	pitot, back pr.) Tubing Pressure (Shut-in)					Casing Pressure (Shut-in)				Choke Size		
OPERATOR CERTIFIC	TATE OF	COLOT	TAN	CE	-							
hereby certify that the rules and regi	ulations of the O	il Conserva	ution			0	IL CON	SERVA	TION	טואופוט	M	
Division have been complied with an	d that the inform	MILION SIVEN	above				, ,	~=!!V/	_			
is true and complete to the best of my	Knowledge and	belief.			Da	ate 4	Approved	<u> </u>	ල්	UL S	1989	
- Dark Rradivis												
Signature					By	By Orig. Signed by						
Robert L. Bradshaw. Pinted Name	Sr. Staf			Spec.			7	Paul Kaut Geologist				
6/29/89	(915)	686-56	fitte 78		Tit	le_						
Date	<del>/</del> /_		ione No	D.								

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.