

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

Form C-104
Revised 10-01-78
Format 08-01-83
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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

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SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator Meridian Oil Inc.
Address 1800 Wilco Bldg. Midland, Texas 79701
Reason(s) for filing (Check proper box)
☐ New Well ☐ Change in Transporter of:
☐ Recompletion ☐ Oil ☐ Dry Gas
☒ Change in Operator ☐ Casinghead Gas ☐ Condensate
Other (Please explain) Test allowable of 300 bbls for January, 1986. Bone Spring formation. Top perf 8695, bottom perf 8738 (27 holes).
If change of ownership give name and address of previous owner El Paso Exploration Company 1800 Wilco Bldg. Midland, Tx 79701

II. DESCRIPTION OF WELL AND LEASE Messalero Escalante
Lease Name Caviness Federal Well No. 2 Pool Name, including Formation Bone Spring Kind of Lease State, Federal or Fee Federal Lease No. NM30398
Location
Unit Letter N : 660 Feet From The South Line and 1980 Feet From The West
Line of Section 11 Township 18S Range 33E , NMPM, Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil ☒ or Condensate ☐
Koch Oil Company Address (Give address to which approved copy of this form is to be sent)
P.O. Box 2256 Wichita, KS 67201
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐
Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks. Unit K Sec. 11 Twp. 18S Rge. 33E Is gas actually connected? No when January, 1986

If this production is commingled with that from any other lease or pool, give commingling order number: _____

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

Carole Myers
(Signature)
Production Clerk
(Title)
1-9-86
(Date)

OIL CONSERVATION DIVISION
JAN 15 1986
APPROVED _____, 19____
BY ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR
TITLE _____

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deeper well, this form must be accompanied by a tabulation of the deviat. tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for all wells on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.
Separate Forms C-104 must be filed for each pool in multi-completed wells.