

TO BE FILLED BY OPERATOR	
DISTRIBUTION	
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
21 Desta Drive, Midland, Texas 79705
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)
CASINGHEAD GAS MUST NOT BE
FLARED AFTER 6-12-87
UNLESS AN EXCEPTION TO 2-4070
IS OBTAINED.
If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name State "16"	Well No. 1	Pool Name, Including Formation S. Corbin (Wolfcamp) <u>R. 8461</u>	Kind of Lease State, Federal or Fee State LG-4087
Location Unit Letter <u>J</u> <u>1980</u> Feet From The <u>South</u> Line and <u>1980</u> Feet From The <u>East</u> Line of Section <u>16</u> Township <u>18S</u> Range <u>33E</u> , NMPM, Lea County			

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> The Permian Corp. Permian (Eff. 9/1/87)	Address (Give address to which approved copy of this form is to be sent) P. O. Box 3119, Midland, Texas 79702					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Unknown at this time	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 J	Sec. 16	Twp. 18S	Rge. 33E	Is gas actually compressed? No	When Unknown

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 <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Depth <input type="checkbox"/>	Other <input type="checkbox"/>
Date Spudded 2-27-87	Date Compl. Ready to Prod. 4-12-87	Total Depth 12,500'	P.B.T.D. 12,250'					
Elevations (DF, RKB, RT, GR, etc.) 3875.9' GR	Name of Producing Formation Wolfcamp	Top Oil/Gas Pay 11,231'	Tubing Depth 11,106'					
Perforations 11,231-11,303'	Depth Casing Shoe -							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
17 1/2"	13 3/8"	372'	350 sx.					
12 1/4"	9 5/8"	3000'	1300 sx.					
7 7/8"	5 1/2"	12,500'	2815'					
	2 7/8"	11,106'						

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 oil
able for this depth or be for full 24 hours)

Date First New Oil Run To Tanks 4-12-87	Date of Test 4-15-87	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 24 hrs	Tubing Pressure 50	Casing Pressure -	Choke Size 24/64"
Actual Prod. During Test 168 BO	Oil-Bbls. 168	Water-Bbls. 0	Gas-MCF 180

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

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

Cathy Hobbs
(Signature)
Engineering Tech III
4/21/87
(Date)

OIL CONSERVATION DIVISION

APR 24 1987

APPROVED _____, 19____
BY ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR
TITLE _____

This form is to be filed in compliance with RULE 1100.
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviate tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for allowable 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.

RECEIVED
APR 22 1987
OCD
HOBBS OFFICE