

OIL CONSERVATION DIVISION

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

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

DISTRICT III  
1000 Rio Brazos Rd, Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

Operator Meridian Oil Inc.	Well API No. 30-025-30772
Address 21 Desta Dr., Midland, TX 79705	
Reason(s) for Filing (Check proper box) New Well <input checked="" type="checkbox"/> Other (Please explain) <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Transporter of: Change in Operator <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	

If change of operator give name  
and address of previous operator

THIS WELL HAS BEEN PLACED IN THE POOL

II. DESCRIPTION OF WELL AND LEASE

Lease Name Federal "23"	Well No. 1	Pool Name Including Formation East Lusk (Wolfcamp)	Kind of Lease State, Federal or Fee Federal	Lease No. NM-12412
Location Unit Letter J, 2310 Feet From The South Line and 2310 Feet From The East Line Section 23 Township 19 South Range 32 East, NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil Texaco Trading & Trans.	or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) P.O. Box 6196, Midland, Texas 79711
Name of Authorized Transporter of Casinghead Gas	or Dry Gas <input type="checkbox"/>	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. 23, Twp. 19-S, Rge. 32-E	Is gas actually connected? No When? Not known at this time.

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 Res'v <input type="checkbox"/>	Diff Res'v <input type="checkbox"/>
Date Spudded 1/24/90	Date Compl. Ready to Prod. 3/21/90	Total Depth 11,455'		P.B.T.D. 11,008'				
Elevations (DF, RKB, RT, GR, etc.) 3602' GR.	Name of Producing Formation Wolfcamp	Top Oil/Gas Pay 10,890'		Tubing Depth 10,968'				
Perforations 10902 - 10990	10,902' - 10,990'		Depth Casing Shoe					
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE 17 1/2"	CASING & TUBING SIZE 13 3/8"		DEPTH SET 358'		SACKS CEMENT 375 sx-Circulated			
12 1/4"	8 5/8"		4,800'		2960 sx-TOC @20'			
7 7/8"	5 1/2"		11,455'		550 sx-TOC @7280'			
	2 7/8" Tbg		10,968'					

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 allowable for this depth or be for full 24 hours.)

Date First New Oil Run To Tank 3/25/90	Date of Test 4/30/90	Producing Method (Flow, pump, gas lift, etc.) Pump: 2 1/2" x 1 1/4" x 36" RHBM	
Length of Test 24 Hrs.	Tubing Pressure -0-	Casing Pressure -0-	Choke Size
Actual Prod. During Test	Oil - Bbls. 8	Water - Bbls. 112	Gas - MCF 25

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. OPERATOR 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.

Signature  
Robert L. Bradshaw  
Printed Name  
Robert L. Bradshaw  
Date  
02 May 1990  
Env./Reg. Spec.  
Title  
915/686-5678  
Telephone No.

OIL CONSERVATION DIVISION

Date Approved MAY 8 1990  
By ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR  
Title

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.

**MAY 7 1990**

**OCD  
HOBBS OFFICE**