

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. 30-025-31192
Address P.O. Box 51810, Midland, TX 79710-1810		
Reason(s) for Filing (Check proper box) New Well <input checked="" type="checkbox"/> Recompletion <input type="checkbox"/> Change in Operator <input type="checkbox"/>		<input type="checkbox"/> Other (Please explain) approval to flare casinghead gas from this well must be obtained from the BUREAU OF LAND MANAGEMENT (BLM)
Change in Transporter of: 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 DESIGNATED BELOW. IF YOU DO NOT CONCUR NOTIFY THIS OFFICE.

II. DESCRIPTION OF WELL AND LEASE

Lease Name Bondurant Federal	Well No. 4	Pool Name, Including Formation Buffalo (Yates) R-9544 7/1/91	Kind of Lease State, Federal or Fee Federal	Lease No. NM-12568-A
Location Unit Letter H : 1980 Feet From The North Line and 330 Feet From The East Line Section 1 Township 19 South Range 32 East, 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"/> Koch Oil Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1558, Breckenridge, Texas 76024					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips 66 Natural Gas Co. GPM Gas Corporation	Address (Give address to which approved copy of this form is to be sent) 4004 Penbrook, Odessa, Texas 79762					
If well produces oil or liquids, give location of tanks.	Unit H	Sec. 1	Twp. 19S	Rge. 32	Is gas actually connected? No	When?

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 x	Gas Well	New Well x	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 21 March 1991	Date Compl. Ready to Prod. 08 April 1991		Total Depth 3800'		P.B.T.D. 3747'			
Elevations (DF, RKB, RT, GR, etc.) 3687' GR.	Name of Producing Formation Yates		Top Oil/Gas Pay 3494'		Tubing Depth 3447'			
Perforations 3494'-3514' w/4 spf, 84 total holes					Depth Casing Shoe 3687'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	8-5/8"		430'		300 sx Class C-Circulated			
7-7/8"	5-1/2"		3800'		360 sc Cl. C Lite. Tail			
					w/300 sx Cl. C Neat. Top			
					w/100 sx Pacesetter Lite			

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.)

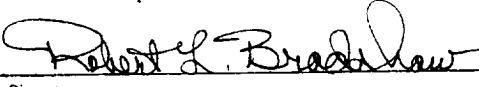
Date First New Oil Run To Tank 10 April 1991	Date of Test 11 April 1991	Producing Method (Flow, pump, gas lift, etc.) 2" x 1-1/4" x 20' RHBC Pump	
Length of Test 24 Hours	Tubing Pressure 20	Casing Pressure 20	Choke Size N.A.
Actual Prod. During Test	Oil - Bbls. 110	Water - Bbls. 66	Gas - MCF 30

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 Sr. Staff Env. Rep.
Printed Name Title
17 April 1991 915-686-5678
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved MAY 1 1991
Orig. Signed by Paul Kautz
By Geologist
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.