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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 Santa Fe, New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

I.		IO IDAN	SPURT UIL	AND NA	I UNAL G	43			
Operator				 		Well A	PI No.		
n Meridian OII	Inc.					30	-025-305	581	
21 Desta Dri	ve. Midl	and, TX	79705						
Reason(s) for Filing (Check proper be		unuş in	7 3 7 0 0	X Oth	et (Please expi	ain)			
New Well		Change in Tra	_	Re	quest 10	000 B.O.	Test Al	llowable	- June, 19
Recompletion	Oil Control	_	y Gas	Pe	rfs. 829	00'-8440	1		Ì
Change in Operator If change of operator give name	Casinghea	id Gas Co	ondensate						
and address of previous operator									
IL DESCRIPTION OF WEI	LL AND LE	ASE							
Lease Name			ol Name, includi	ng Formation		Kind o	f Lease	L	ease No.
Federal "AM"		2 N	<u>orth Youn</u>	g (Bone	Spring)	State,	Federal or Fe	* NM−18	3232
Location		1000							
Unit Letter	:	1980 Fe	et From The	West Lin	e and	660 Fe	et From The	Nort	Line Line
Section 8 Tow	maship 18 So	nuth Ra	inge 32 Eas	t NI	мрм.			Lea	Country
					VII IVI,			Lea	County
II. DESIGNATION OF TR	ANSPORTE			RAL GAS					
Name of Authorized Transporter of O Koch Services	MI X	or Condensate	· 🗆	Address (Giv	e address to w	hich approved Midl	copy of this f	form is to be se	mt)
Name of Authorized Transporter of C	asinohead Gas	7	Dry Gas				and, TX		
Not Known Now			Diy Gas	Address (Giv	e aaaress to w	nich approved	copy of this f	form is to be st	int)
If well produces oil or liquids,	Unit	Sec. Tw	vp. Rge.	Is gas actuall	y connected?	When	?		
ive location of tanks.	F	8 18		No		<u>j</u> No	t Known	Now	
this production is commingled with the COMPLETION DATA	that from any oth	er lease or pool	i, give comming	ing order numi	per:				
V. COMPLETION DATA		Oil Well	l Con Will	1 21 22 11	1	<u> </u>		,	
Designate Type of Completi	ion - (X)	I OII MEII	Gas Well 	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded	Date Com	pl. Ready to Pro	xd.	Total Depth	L	<u></u>	P.B.T.D.	<u> </u>	
Elevations (DF, RKB, RT, GR, etc.)	Name of P	roducing Forms	ation	Top Oil/Gas	Pay		Tubing Dep	th	
Perforations							Depth Casing Shoe		
							Liento Casin	ig 2poe	
	Т	TUBING, CA	ASING AND	CEMENTI	NG RECOR	D			
HOLE SIZE		TUBING, CA	ASING AND NG SIZE	CEMENTI	NG RECOR			SACKS CEM	ENT
HOLE SIZE				CEMENTI				SACKS CEM	ENT
HOLE SIZE				CEMENTI				SACKS CEM	ENT
HOLE SIZE				CEMENTI				SACKS CEM	ENT
	CA	SING & TUBIN	NG SIZE	CEMENTI				SACKS CEM	ENT
'. TEST DATA AND REQU IL WELL (Test must be aft	JEST FOR A	SING & TUBIN	NG SIZE		DEPTH SET				
. TEST DATA AND REQU IL WELL (Test must be aft	JEST FOR A	SING & TUBIN ALLOWABI Otal volume of lo	NG SIZE	be equal to or	DEPTH SET	owable for this	depth or be		
7. TEST DATA AND REQU OIL WELL (Test must be aft Date First New Oil Run To Tank	JEST FOR A Date of Te	SING & TUBIN ALLOWABI otal volume of loss	NG SIZE	be equal to or Producing Me	exceed top alle	owable for this	depth or be		
V. TEST DATA AND REQU DIL WELL (Test must be aft Date First New Oil Run To Tank	JEST FOR A	SING & TUBIN ALLOWABI otal volume of loss	NG SIZE	be equal to or	exceed top alle	owable for this	depth or be		
7. TEST DATA AND REQU OIL WELL (Test must be aft Date First New Oil Run To Tank Length of Test	JEST FOR A Date of Te	SING & TUBIN ALLOWABI otal volume of loss	NG SIZE	be equal to or Producing Me	exceed top alle	owable for this	depth or be		
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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 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.