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Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

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

State of New Mexico mergy, Minerals and Natural Resources Depan

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

I	•	TO TRA	ANS	PORT OI	L AND NA	TURAL G	SAS				
Operator Meridian Oil Inc.				API No.							
							30	-025-3060	6		
Address 21 Desta Dr., Midland, T)	79705										
Reason(s) for Filing (Check proper box)			_		Oth	er (Please exp	vlain)				
New Well Recompletion	0.1	Change in	٦.								
Recompletion Change in Operator	Oil Casinghea	4 Gez -	Dry	lengate							
If change of operator give name	Canagnes	d Oak	Conc	KOMIE						· · · · · · · · · · · · · · · · · · ·	
and address of previous operator					 						
II. DESCRIPTION OF WELL	AND LEA	SE			<u> </u>						
Lease Name		Well No.	1	Name, Includ	· .			of Lease	_	Lease No.	
Federal "AF"	2 North Young (Bone Spring) State, Federal or Fee NM-4								10448		
Location Unit Letter N	. 880 <	760	_ Feet	From The Sc	outh Line	and 1980	-1880 F	eet From The V	/est	Line	
Section 8 Townsh	8 m 19 South m 20 East								County		
III. DESIGNATION OF TRAN	SPORTE	R OF O	IL A	ND NATU	RAL GAS						
Name of Authorized Transporter of Oil	[X]	or Conder			Address (Giw			d copy of this for			
Koch Pipeline				لـــا 	P. O. Box 3609, Midland, Texas 79702						
Name of Authorized Transporter of Casin Conoco, Inc.	torized Transporter of Casinghead Gas X or Dry Gas Address (Give address to which approved co							d copy of this for	m is to be so	int)	
If well produces oil or liquids,	1. O. Box 2107, Houston, Texas 172							as 1125	2		
give location of tanks.	K	8	18	_ •	1 -	Yes	when /				
If this production is commingled with that	from any other	er lease or	pool, g	ive comming	ing order numb	er:					
IV. COMPLETION DATA							-,				
Designate Type of Completion	- (X)	Oil Well	. 	Gas Well	New Well	Workover	Deepen	Plug Back S	ame Res'v	Diff Rea'v	
Date Spudded	Date Comp	l. Ready to	Prod.		Total Depth		<u>-1</u>	P.B.T.D.			
5/11/89	6/07/90 (Plug Back)					10,800'			10,365'		
Elevations (DF, RKB, RT, GR, etc.) 3772° GR.	Name of Producing Formation				Top Oil/Gas P	•		Tubing Depth	•		
3772' GR. North Young (Bone Spring)				<u> </u>	8203'		8758' Depth Casing Shoe				
8318'-8618', 9222'-9242'North Young					(Bone Spri	ing)		Depth Casing	Shoe 10,800'		
	TUBING, CASING AND				CEMENTIN	IG RECOR	D				
HOLE SIZE	CASING & TUBING SIZE					DEPTH SET	·	SA	SACKS CEMENT		
17 1/2"	13 3/8"				406'			425 sx			
12 1/4"	ļ	8 5/8"			2805'			1450 sx			
7 7/8"	5 1/2"				10,800'				1850'		
V. TEST DATA AND REQUES	T FOR A	2 7/8"				8758'		<u> </u>			
					be equal to or i	exceed top alle	owable for the	s denth or he for	full 24 hour	re l	
Date First New Oil Run To Tank	Date of Test		9,		t be equal to or exceed top allowable for this depth or be for full 24 hours.) Producing Method (Flow, pump, gas lift, etc.)						
6/08/90		6/11/9	0					' Insert Pump			
Length of Test	Tubing Press	sure			Casing Pressur			Choke Size	•		
24 Hrs.	<u> </u>				· · · · · · · · · · · · · · · · · · ·						
Actual Prod. During Test	Oil - Bbls.			Water - Bbls. 165			Gas- MCF	253	_		
CACTUELL	1							· 			
GAS WELL Actual Prod. Test - MCF/D	I anoth of T				Bbis. Condens	ate A A A A C E		C-viry of Co-	4.22		
Actual Frod. Test - MICH/D	Length of To	CBL C			Bois. Congens	ate/MINICI		Gravity of Con	ocniale		
esting Method (pitot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size			
VI. OPERATOR CERTIFIC	A TITE OF		1 7 4 3	ICT				1			
				NCE	0	IL CON	ISERV	ATION D	IVISIO	N	
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above				OIL CONSERVATION DIVISION							
is true and complete to the best of my knowledge and belief.				Date Approved				V 1 5 1990			
	0				Dale	~hhiove	u				
telesta. Gradelaw					Dec Control Closics by 15024 CEYTOM						
Signature Robert L. Bradshaw Env./Reg. Spec.				By ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR							
Printed Name			Title	·	Title_		213				
13 June 1990		915-6			Title_						
Date		Telep	hone N	√o. i	1						

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.

DEET 2 . ALL

Set Control

RECEIVEL

JUN 14 1990

HOBBS OFFICE

Submit 5 Copies
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DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

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OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

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

> REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.	•	TO TRA	NSP	ORT OI	L AND NA	TURAL G	AS	•					
Operator Meridian Oil Inc									Well API No. 30-025-30606				
Address							30.	-025-3060					
21 Desta Dr., Midland, TX	79705												
Reason(s) for Filing (Check proper box)						er (Please expl							
New Well Recompletion	Change in Transporter of: Request 1500 B.O. Test Allowable. Oil Dry Gas Perfs.: 8318'-8618', 9222'-9242'												
Change in Operator	Casinghea	d Gas 🔲	Conde	_	()	une 190		,					
If change of operator give name and address of previous operator				·									
II. DESCRIPTION OF WELL	ANDIE	CE											
Lease Name							Kind	of Lease	ease No.				
Federal "AF"	2 North Young				(Bone Spi	ring)	State, Fede	Federal or Federal	NM-4	10448			
Location	560			6.	h	1000							
Unit Letter N	_ ; 560		. Feet Fr	rom The $\frac{Sc}{2}$	Lin Lin	e and 1880	F	et From The	West	Line			
Section 8 Townshi	p 18 S	outh	Range	32 Eas	t , <u>N</u> I	мрм,		Lea		County			
III. DESIGNATION OF TRAN	SPORTE			D NATU									
Name of Authorized Transporter of Oil Koch Oil Company	X	or Conden	sale		Address (GIV	e address to when P. O. Box							
Name of Authorized Transporter of Casin Conoco, Inc.	Name of Authorized Transporter of Casinghead Gas X or Dry Gas						P. O. Box 3609, Midland, Texas 79702 Address (Give address to which approved copy of this form is to be sent)						
If well produces oil or liquids,	10. 20. 210.1, 10.00.011, 10.20.017,							xas 1125.					
give location of tanks.	N	8	185			Yes	i						
If this production is commingled with that IV. COMPLETION DATA	from any other	er lease or	pool, giv	ve comming	ling order numl	ber:	 .						
Designate Type of Completion	- (X)	Oil Well	10	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v			
Date Spudded	Date Compl. Ready to Prod.				Total Depth	<u> </u>	<u></u>	P.B.T.D.					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation				Top Oil/Gas	Pay		Tubing Depth					
Perforations					<u> </u>			Darth Carin	Depth Casing Shoe				
a at the property								Deput Casing	g Silve				
					CEMENTI	NG RECOR	D						
HOLE SIZE	SIZE CASING & TUBING SIZE					DEPTH SET		S	SACKS CEMENT				
	 						· · · · · · · · · · · · · · · · · · ·	 					
V. TEST DATA AND REQUES	T FOR A	LLOWA	DIE		L			<u> </u>					
OIL WELL (Test must be after re				oil and must	be equal to or	exceed top allo	wable for this	s depth or be f	or full 24 hou	rs.)			
Date First New Oil Run To Tank	Date of Test					thod (Flow, pu							
Length of Test	Table a Desc		· · ·		Casing Pressu			Choke Size	Choke Size				
rengin or less	n of Test Tubing Pressure				Casing Freeze								
Actual Prod. During Test	Oil - Bbls.			Water - Bbls.			Gas- MCF						
GAS WELL	<u> </u>				I								
Actual Prod. Test - MCF/D	Length of Test				Bbls. Condens	sate/MMCF		Gravity of Condensate					
Sesting Method (pitot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressu	re (Shut-in)		Choke Size					
UT ODDD A MOD CODD	4 7772 67	001 00		Cr	lr								
VI. OPERATOR CERTIFIC. I hamby certify that the pulse and regular				ICE	c	DIL CON	SERV	ATION [DIVISIO	N			
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above					Date Approved JUN 0 7 1990								
is true and complete to the best of my k	nowledge and	d belief.			Date	Approved	t	JUN	<i>3 (</i> 199	V			
Rout C. Br	a leka	سوره						ic Signed	by Vd				
Signature					By Orig. Signed by Paul Kauts								
Robert L. Bradshaw Env./Reg. Spec. Printed Name Title					Tilla			Geologis	Շ				
05 June 11990		915/6	86-56		Title								
Date		Telep	phone No	0.	[]								

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