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

State of New Mexico E y, Minerals and Natural Resources Departmen

Revised 1-1-89 See Instructions at Bottom of Page

OIL CONSERVATION DIVISION

P.O. Box 2088

DISTRICT II P.O. Drawer DD, Artesia, NM 88210 DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410

Santa Fe, New Mexico 87504-2088

| 1000 Rio Brazos Rd., Aztec, NM 87410 I. | | FOR ALLOWA ANSPORT OIL | | | | | | | |
|--|---|-----------------------------|---------------------------|------------------------------|--|----------------------------|---------------|----------------|--|
| Operator | 10 111 | AND ON O | 271112 117 | TOTIVE OF | | API No. | | | |
| Meridian Oil Inc. | | 30-025-30985 | | | | | | | |
| Address P.O. Box 51810, Midland, | TX 79710-1 | 810 | | CAS | SINGHEA | D GAS MU | ST NOT | BE | |
| Reason(s) for Filing (Check proper box) | | | Ot | ner (Please expla | PRED AFT | ER 6 | | 1 | |
| New Well | UNLESS AN EXCEPTION TO R-4070 | | | | | | | | |
| Recompletion | Oil | in Transporter of: Dry Gas | | | | | | | |
| Change in Operator | Casinghead Gas | Condensate | | 15.0 | OBTAINE | J. | | | |
| If change of operator give name and address of previous operator | Cashighead Cas | Concensie | | | | ancel | n.y | oung t | |
| II. DESCRIPTION OF WELL Lease Name | | Deal Name Jealud | ia Farmatia | 10 ach | | | | | |
| Mitchell "16" State | Well No. | ニー ハルカオスラ (ノベル) | Andres) | R-954 | | of Lease Federal or Fee | | ease No. 57 | |
| Location | | | | | LIGIAN | | | - | |
| Unit Letter G | : 1650 | _ Feet From The No. | orth Lit | e and 2310 | Fe | et From The E | ast | Line | |
| Section 16 Townshi | p 18 South | Range 32 Eas | t , N | мрм, | | Lea | | County | |
| III. DESIGNATION OF TRAN | SPORTER OF C | | | | | | | · | |
| Name of Authorized Transporter of Oil 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 Casing Conoco, Inc. | of Authorized Transporter of Casinghead Gas X or Dry Gas Conoco, Inc. | | | | Address (Give address to which approved copy of this form is to be sent) P.O. Box 2197, Houston, Texas 77001 | | | | |
| If well produces oil or liquids, pive location of tanks. | | | | | When | | | | |
| f this production is commingled with that f | from any other lease or | r pool, give comming | ing order num | | Permit P | C-780 bein | | ed. | |
| Designate Type of Completion | Oil Wel | li Gas Well | New Well | Workover | Deepen | Plug Back S | same Res'v | Diff Res'v | |
| Date Spudded | Date Compl. Ready t | io Prod. | Total Depth | L | اــــــا | P.B.T.D. | | .L | |
| 9/01/90 | 3/10/91 (Plug Back) | | 10,950' | | | 6565' | | | |
| Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation | | | Top Oil/Gas Pay | | | | | | |
| 3787' GR. Wildcat (San Andres) | | | 4569' | | | Tubing Depth 4283' | | | |
| Perforations 4 | 28' | | | Depth Casing Shoe 10,950' | | | | | |
| | TUBING | , CASING AND | CEMENTI | NG RECOR | D | | | | |
| HOLE SIZE | | | | DEPTH SET | | | SACKS CEMENT | | |
| 17-1/2" | 13-3/8" | | 364' | | | 375 sx-Circulated | | | |
| 12-1/4" | 8-5/8" | | 2.907' | | | 1450 sx-Circulated | | | |
| 7–7/8" | 5-1/2" | | 10,950' | | | 1750 sxDV @8.011' | | | |
| , ,,, | 2-7/8" Tubing | | 8367' | | | 1730 SXDV @8,011 | | | |
| TEST DATA AND REQUES OIL WELL (Test must be after re | | ABLE | h | | | | | J | |
| Date First New Oil Run To Tank | Date of Test | oj toda ou ana must | | thod (Flow, pur | | | Juli 24 hours | 5.) | |
| 03/10/91 | 03/18/ | | | | | | | | |
| ength of Test | | | 2-1/2" x 1-1/4" x 24' | | | Choke Size | | | |
| 24 hrs. | Tubing Pressure 20 | | Casing Pressure | | | | | | |
| Actual Prod. During Test | Oil - Bbls. | | Water - Bbls. 185 | | | Gas- MCF | | | |
| GAS WELL | | | | | | | | | |
| Actual Prod. Test - MCF/D | Length of Test | | Bbis. Condensate/MMCF | | | Gravity of Condensate | | | |
| esting Method (pilot, back pr.) | Tubing Pressure (Shut-in) | | Casing Pressure (Shut-in) | | | Choke Size | | | |
| I. OPERATOR CERTIFICATION OF THE PROPERTY OF T | tions of the Oil Consernation give | vation | | OIL CON | L | TION D | | N | |

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

Signature

Date

Robert L. Bradshaw

Printed Name 18 April 1991

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.

Title.

ORIGINAL SIGNED BY JERRY SEXTON

DISTRICT I SUPERVISOR

2) All sections of this form must be filled out for allowable on new and recompleted wells.

Sr.StaffEnv.Rep.

Title

915-686-5678

Telephone No.

- 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.