nit 5 Conie ne District Office RICT Box 1980, Hobbs, NM 88240

I.

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

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

State of New Mexico Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

TO TRANSPORT OIL AND NATURAL GAS

Operator	Well API No.
Meridian Oil Inc.	
Address	
21 Desta Drive Midland, Texas 79	0705
Resson(s) for Filing (Check proper box)	Other (Please explain)
New Well Change in Transporter of:	Effective 2-1 -89
Recompletion 🔲 Oil 🗌 Dry Gas 🗌	
Change in Operator	
If change of operator give same Doyle Hartman P.O. Bo	ox 1861 Midland, Texas 79702
IL DESCRIPTION OF WELL AND LEASE	
Lease Name Well No. Pool Name, inclu	
State A-20 2 Eunice-M	onument Grayburg State, Redenix Ret B-2656
Location	
Unit Letter J : Feet From The	S Line and 2100 Feet From The E Line
Section 20 Township 20-S Range 37-	E .NMPM. Lea County
III. DESIGNATION OF TRANSPORTER OF OIL AND NAT	JRAL ĜAS
Name of Authorized Transporter of Oil KX or Condensate	Address (Give address to which approved copy of this form is to be sent)
Texaco Trading & Transportation	P.O. Box 3109 Midland, Texas 79702
Name of Authorized Transporter of Casinghead Gas XX or Dry Gas	
Phillips 66 Natural Gas Company GPM Gos C	Address (Give address to which approved copy of this off is to be sent) 74004 Prorgtimew EFFE TVE: February of this off is to be sent) 74004 Prorgtimew EFFE TVE: February of this off is to be sent) 74004
If well produces oil or liquids, Unit Sec. Twp. Rg	I is gas actually connected? When ?
pive location of tanks. J 20 20S 37E	
VI. OPERATOR CERTIFICATE OF COMPLIANCE	
I hereby certify that the rules and regulations of the Oil Conservation	OIL CONSERVATION DIVISION
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.	MAR ~ 6 1989
is also and compress to the test of my anowings and belies.	Date Approved
Comi Monalian	
Signature	By ORIGINAL SIGNED BY JERRY SEXTON
<u>Connie Monahan</u> Operations Tech III	DISTRICT I SUPERVISOR
Printed Name Title 2–24–89 915/686–5681	Title
Date Telephone No.	

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.

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