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State of New Mexico Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION DISTRICT II P.O. Drawer DD, Antenia, NM 88210

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

···		, 10 111/	7110F C		AND INATION	AL GAS		
Operator							Well API No.	
Meridian Oil Inc	2.							
Address								
21 Desta Drive		Midla	nd, Te	YAC	7 97 05			
Reason(s) for Filing (Check proper box)			1.0.			ise explain)		
New Well		Change is	n Transpor	ter of:	_	•	2-1 - 89	
Recompletion	Oil	_ ّ_	Dry Gas		1.	LICCUIVE	2-1 -09	
Change in Operator	Casinghe	ad Gas	Condens	_				
change of operator give name	le Har		,		1061	16117 1		
ad address of previous operator	TE nai	Ciliali	t	7.U. BC	x 1861	Midland,	, Texas 7970	2
L DESCRIPTION OF WELL	AND LE	ASE						
ease Name	THE DE	Well No.	Pool Ne	me Inchydia	ng Formation		Kind of Lease	, ,
J. Hiram Moore S	tate	1		umont	(Penrose) y	SR-ON	State, Robert XXXX	Lease No.
ocation					/	UN CON		B-1167
		200				200		
Unit LetterD	_ :`	990	_ Feet Fro	an The	N Line and _	990	Feet From The	W Line
		_	_					
Section 18 Towns	i p 21-	-S	Range	<u> 37-e</u>	, NMPM,		<u>Lea</u>	County
II. DESIGNATION OF TRAINAMENT OF Authorized Transporter of Oil		OF Conde		NATU		·	PERMIAN CORP EFF 9	
Permian Corporation				Address (Give address to which approved copy of this form is to be sent)				
lams of Authorized Transporter of Casi	ohead Gas	KX.	on Day (300	P.O. Box 1		Houston, Tx.	77001
Fl Paso Natural Gas Co.					Address (Give address to which approved copy of this form is to be sent)			
f well produces oil or liquids,	Unit	Sec.	Twp.		P.O. Box 1			252
ve location of tanks.	i D	18	215	Rge. 37E	Is gas actually conne yes		When ? 5-4-	.79
L OPERATOR CERTIFIC	1 ~				y C.			
				CE			RVATION DI	VICION
I hereby certify that the rules and regu- Division have been complied with and	that the infe	B Utl Conse	rvation			CONSE	IN AN HON DI	V12101A
is true and complete to the best of my	Knowledge :	numuon giv ind belief	ACI MOOAG				MAD	8 1989
					Date App	proved _	MAR	0 1909
- Carrie	<i>Y</i> //		///		1			
Signature		41.160	77.21	<u></u>	Ву	ORIGI	NAL SIGNED BY JE	RRY SEXTON
	peration	ns Tec	h III		Jy		DISTRICT I SUPER	VISOR
Printed Name Title								
2-24-89		915/68		l	Title			
Date		Tal	andream Nie		11			

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
- 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.