

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

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

OIL CONSERVATION DIVISION

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.		Well API No.	
Operator		30-025-2673600	
MERIDIAN OIL INC.			
Address			
P. O. BOX 51810, MIDLAND, TX 79710-1810			
Reason(s) for Filing (Check proper box)		XI Other (Please explain)	
New Well ☐	Change in Transporter of:	To correct Gas Gatherer from El Paso Natural	
Recompletion ☐	Oil ☐ Dry Gas ☐	Gas Co. to Sid Richardson Carbon & Gasoline	
Change in Operator ☐	Casinghead Gas ☐ Condensate ☐	Company.	
If change of operator give name and address of previous operator			

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Gutman	1	Eumont Yates TEVERSON	State, Federal or Fee	
Location				
Unit Letter	B	330	Feet From The north Line and 1980	Feet From The east Line
Section	13	Township	0215	Range
			036E	NMPM.
				Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)			
Scurlock Permar Corp.				
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)			
Sid Richardson Carbon & Gasoline Co.	201 Main Street, Ft. Worth, TX 76102			
If well produces oil or liquids, give location of tanks	Unit	Sec.	Twp.	
	G	13	0215	
			Rgn.	
			36E	
Is gas actually connected?	When			
yes	8-22-80			
If this production is commingled with that from any other lease or pool, give commingling order number:				

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing Shoe			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)

Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Connie L. Malik
Signature
Connie L. Malik, Regulatory Compliance Rep.
Printed Name
1/22/92
Date
915-688-6891
Telephone No.

OIL CONSERVATION DIVISION

FEB 07 '92

Date Approved

By

Title

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.