District J PO Bez 1998, Hobbs, NM 88241-1988 District II PO Drewer DD, Artenia, NM 88211-8719 District III 1888 Ris Brazes Rd., Aztec, NM 87418			State of New Mexico Energy, Minerals & Natural Resources Department OIL CONSERVATION DIVISION PO Box 2088 Santa Fe, NM 87504-2088							Revised	Form February 10	
								Instructions Submit to Appropriate District 5				
District IV PO Box 2008, Santa	7e, NM 87584-26	61										
I	REQUE	ST FOI	ALLOW	VABLE	AND A	UTHOR	UZATI	ON TO 1	TRAN	ISPOR'	<u>—</u> Г	
Meridian		Operat	or name and A	ddress					.0	CRID Nem		
Meridian Oil Inc. P.O. Box 51810								26485 ³ Resson for Filing Code				
Midland, Tx 79710-1								NW				
30 - 0 25-32303 Property Code 006863			¹ Pool Name Eumont (Yts, 7Rvrs, Qn) ¹ Property Name Brownlee					76480 Pool 0			Pool Code	
								* Wall Nambus				
	ce Locatio		owinee							# 2		
Ul or lot no. Sectio	Township	Range			from the	North/So	th Line Fi	at from the	East/	West line 1		
I 25	m Hole Lo	36		1	948'	Sout	h	660'		st	Lea	
UL or let so. Sectio	Township		Lot Ida	Feet	from the	Nerth/Set						
Same as S								nt from the	East/1	Vest Las	County	
P	feeing Method C F	1	as Connection 3/29/94	Dete	" C-129 Per n/a	nit Number	" C-	29 Effective	Date	" C-11	9 Expiration De	
I. Oil and Ga	s Transpor	rters	0/20/04								·	
Trusperter OGRID	"Transporter "Tran		e Name	T	u POD u		" O/G		PODU	LSTR Loca	cies.	
		rdson (son Gasoline Co		2808890					and Description		
	201 Main	Street	, Ft. Wo	rth	0000	10		Sec. 25	, T21	.S, R36	δE	
	<u> </u>											
								······				
Droduced 11												
Produced W					× 800 17 5							
		·····			100 013	TR Location	and Descript	ice				
Well Comple	tion Data	* Ready Dr										
3/1/94	3/2	21/94		37	" 10 700 '			56'	34	" Per	orations 7.C.I	
" Hole Sin		'nС	asing & Tubin	e Size		²² Dept				434'-3576'		
12 1/4"			8 5/8" 28#		435'			" Secks Censent 375 sxs 'C'				
7 7/8" 4 1/		4 1/2	11.6#		3700'			1261 sxs 'C'				
Well Test Da												
	" Gas Deliv	rry Date	* ты 3/26/9			Cest Length		Tog. Pressur	•	P Cag	. Pressure	
Date New Ol			4 11/		2	4 4 G x		161		160		
" Date New Ol	" OI	•			1			* AOF 64		flowi	t Mersit ng	
" Choke Stap	Ø		Ø				and the second second					
" Choke Stan eby certify that the sub d that the information are and belief.	Ø			complied my		OIL CO	ONSEP		ייזת ו	1010		
" Choke Stan eby certify that the rule d that the information age and belief. re:	Ø s of the Oil Cons siven above is tru			шy	Approved by:	. 14	rg · Oldin	VATION ed by	I DIV	ISION		
"Choke Stan cby certify that the cul- d that the information are and belief. re: DOnna Willin	Ø st of the Oil Coast friven above is tra	e and comple		^τ œγ	Approved by: Title:	. 14	DNSER ig. Sign Paul Ka Geologi	utz	I DIV	ISION		
* Choke Star cby certify that the cul- d that the information are and belief. re: Donna Willia Production	Ø er of the Oil Cons given above is true <u>Constant</u> Assistant	ervation Divi e and comple	ision have been the to the best of	·]	g Sign Paul Ka Geologi	utz		ISION		
* Choke Stan eby certify that the rule d that the information are ad belif. re: Donina Willia Production / 4/4/94	Ø at of the Oil Cons inven above is true a	ervation Div e and comple	to the best of		Title: Approval Date]	Paul Ka	utz		ISION		
* Choke Stan eby certify that the rule d that the information age ad belif. re: DONINA Willia Production / 4/4/94 a is a change of opera	Ø at of the Oil Cons inven above is true a	ervation Div e and comple	to the best of		Title: Approval Date]	g Sign Paul Ka Geologi	utz		ISION		

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	THIS IS AN AMENDED REPORT, CHECK THE BOX LABLED	22.	The ULSTR location of this POD if it i			
Re Re	port all gas volumes at 15.025 PSIA at 60°. port all oil volumes to the nearest whole barrel.		well completion location and a short de (Example: "Battery A", "Jones CPD",			
A i ac	request for allowable for a newly drilled or deepened well must be companied by a tabulation of the deviation tests conducted in cordance with Rule 111.	23.	The POD number of the storage from w from this property. If this is a new well this POD has no number the district number and write it here.			
	sections of this form must be filled out for allowable requests on w and recompleted wells.	24.	The ULSTR location of this POD if it well completion location and a short de lexample: "Rettery & Works and the short de lexample: "Rettery & Works"			
Fill out only sections I, II, III, IV, and the operator certifications for changes of operator, property name, well number, transporter, or other such changes.			(ana ,etc.)			
	-	25. 26.	MO/DA/YR drilling commenced			
A separate C-104 must be filed for each pool in a multiple completion.			MO/DA/YR this completion was ready t			
Imp	roperly filled out or incomplete forms may be returned to	27. 28.	Total vertical depth of the well			
			Plugback vertical depth			
1. 2.	Operator's name and address Operator's OGRID symbols of your b	29.	Top and bottom perforation in this cor shoe and TD if openhole			
	Operator's OGRID number. If you do not have one it will be assigned and filled in by the District office.	30.	inside diameter of the well bore			
3.	Reason for filing code from the following table:	31.	Outside diameter of the casing and tubi			
	RC Recompletion CH Change of Operator	32.	Depth of casing and tubing. If a casing bottom.			
	CO Change oil/condeneate transporter	33.	Number of sacks of cament used per ca			
	CG Change gas transporter CG Change gas transporter RT Request for test allowable /include university	The following test data is for an oil well it mu conducted only after the total volume of load oil i				
	If for any other reason write that reason in this box.	34.	MO/DA/YR that new oil was first produc			
4.	The API number of this well	35.	MO/DA/YR that gas was first produced in			
5.	The name of the pool for this completion	36.	MO/DA/YR that the following test was c			
8 .	The pool code for this pool	37.	Length in hours of the test			
7.	The property code for this completion	38.	Flowing tubing pressure a cit walls			
8.	The property name (well name) for this completion	39.	onation tubing pressure - gas wells			
9.	The well number for this completion	33.	Flowing casing pressure - oil wells Shut-in casing pressure - gas wells			
10.	The surface location of this completion NOTE: If the United States government survey determined to the survey of t	40.	Diameter of the choke used in the test			
	United States government survey designates a Lot Number for this location use that number in the 'UL or lot no.' box. Otherwise use the OCD unit letter.	41.	Barrels of oil produced during the test			
11.	and the obb dist letter.	42.	Barrels of water produced during the test			
12.	The bottom hole location of this completion	43.	MCF of gas produced during the test			
	Lease code from the following table: F Federal S State	44.	Gas well calculated absolute open flow in			
	P Fee	45.	The method used to test the wall:			
	N Navaio		F Flowing P Pumping			
	U Ute Mountain Ute I Other Indian Tribe		S Swabbing If other method please write it in.			
13.	The producing method code from the following table: F Flowing P Pumping or other artificial lift	46 .	The signature, printed name, and title authorized to make this report, the date signed, and the telephone number to			
14.	MO/DA/VR that this complexity		about this report			

- MO/DA/YR that this completion was first connected to a gas transporter 15.
- The permit number from the District approved C-129 for this completion 16.
- MO/DA/YR of the C-129 approval for this completion
- MO/DA/YR of the expiration of C-129 approval for this completion 17.
- 18. The gas or oil transporter's OGRID number
- Name and address of the transporter of the product 19.
- The number assigned to the POD from which this product will be transported by this transporter. If this is a new well or recompletion and this POD has no number the district office will assign a number and write it here. 20.
- Product code from the following table: O Oil G Gas 21.

- t is different from the lescription of the POD ,etc.)
- which water is moved II or recompletion and t office will assign a
- is different from the secription of the POD "Jones CPD Water
- to produce
- ompletion or casing
- ing
- liner show top and
- asing string

ist be from a test is recovered.

- icad
- into a pipeline
- completed

- n MCF/D
- of the person this report was all for questions about this report
- The previous operator's name, the signature, printed name, and title of the previous operator's representative authorized to verify that the previous operator no longer operates this completion, and the date this report was signed by that person 47.

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