

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

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

WELL API NO.

30-025-28382

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

NM 549

7. Lease Name or Unit Agreement Name

EMERY KING nu

8. Well No.

6

9. Pool name or Wildcat

LANGLIE MATTIX 7RV, QN, GB

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"
(FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well:

OIL
WELL ☒

GAS
WELL ☐

OTHER

2. Name of Operator

MERIDIAN OIL INC.

3. Address of Operator

P.O. Box 51810, Midland, TX 79710-1810

4. Well Location

Unit Letter C : 440 Feet From The N Line and 2200 Feet From The W Line

Section 1

Township 23

Range 36

NMPM LEA

County

10. Elevation (Show whether DP, RKB, RT, GR, etc.)

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: AMEND WATER DISPOSAL METHOD ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: ☐

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

1. PRODUCING FORMATION IS THE 7 RIVERS, QUEEN, GRAYBURG.

2. AMOUNT PRODUCED IS 43 BOWD

3. CURRENT WATER ANALYSIS IS FORTHCOMING

4. WATER STORED IN A 500 BBL STEEL TANK

5. WATER IS HAULED BY MCCASLAND SERVICES, INC.

BOX 99

EUNICE, NM 88231

6. WATER IS TAKEN TO BIG STORAGE TANKS ON THE LANGLIE JAL UNIT. IT IS PUMPED INTO OUTLYING INJECTION WELLS, AND REINJECTED INTO THE WATERFLOOD PROJECT.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE

TITLE PRODUCTION ASSISTANT

DATE 7/19/93

TYPE OR PRINT NAME DONNA WILLIAMS

TELEPHONE NO. 915-688-6943

(This space for State Use)

Paul Kautz
Geologist

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

JUL 23 1993

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

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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

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

**REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS**

Operator MERIDIAN OIL INC.		Well API No.
Address 21 DESTA DRIVE MIDLAND, TX 79705		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input type="checkbox"/>	Change in Transporter of:	
Recompletion <input type="checkbox"/>	Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/>	Effective 7-1-89
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	

If change of operator give name
and address of previous operator

II. DESCRIPTION OF WELL AND LEASE

Lease Name EMERY KING NW	Well No. 6	Pool Name, Including Formation LANGLIE MATTIX 7 RIVERS QUEEN	Kind of Lease State, Federal or Fee	Lease No. NM 549	
Location					
Unit Letter C	440	Feet From The N	Line and 2200	Feet From The W	Line
Section 1	Township 23-S	Range 36-E	NMPM, LEA		County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

SCURLOCK PERMIAN CORP EFF 9-1-91

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
THE PERMIAN CORP	P.O. BOX 3119 MIDLAND, TX 79702					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
PHILLIPS 66 NATURAL GAS	10 W.W. Frank Ph					
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 1	Twp. 23S	Rge. 36E	Is gas actually connected? YES	When? UNKNOWN

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.

Barbara Carter Noland

Signature
BARBARA CARTER NOLAND **PROD. ASST.**
Printed Name Title

7-14-89 (915) 686-5600
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved **JUL 19 1989**

By **ORIGINAL SIGNED BY JERRY SEXTON**
DISTRICT I SUPERVISOR

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.

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

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-104
Revised 4-1-80
Number of Pages

OIL CONSERVATION DIVISION

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

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

I.

Operator MERIDIAN OIL INC.		Well API No.
Address 21 Desta Drive Midland, Texas 79705		
Reason(s) for Filing (Check proper box) New Well <input type="checkbox"/> Other (Please explain) <input type="checkbox"/> Effective 2-1 -89 Recompletion <input type="checkbox"/> Change in Operator <input checked="" type="checkbox"/> Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>		
If change of operator give name and address of previous operator Doyle Hartman P.O. Box 1861 Midland, Texas 79702		

II. DESCRIPTION OF WELL AND LEASE

Lease Name Emerv King NW	Well No. 6	Pool Name, including Formation Langlie Mattix 7 Rivers Queen	Kind of Lease State, Federal or Fee	Lease No. NM 549
Location Grayburg				
Unit Letter C : 440 Feet From The N Line and 2200 Feet From The W Line				
Section 1 Township 23-S Range 36-E NMPM Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Sun Refining & Marketing Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 3187 Longview, Texas 75606					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips 66 Natural Gas	Address (Give address to which approved copy of this form is to be sent) 10 W.W. Frank Phillips Bldg., Bartlesville, OK 74004					
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 1	Twp. 23S	Rgn. 36E-	Is gas actually connected? yes	When?

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.

Signature
Connie Monahan
Printed Name
Operations Tech III
Date
2-24-89
Telephone No.
915/686-5681

OIL CONSERVATION DIVISION

Date Approved **MAR 10 1989**

By **Paul Kautz**
Orig. Signed by
Geologist

Title

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

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