"nergy, Minerals & Natural Resources Department

Revised February 10, 1994

District II TO Drawer DD, Artesia, NM 88211-0719

OIL CONSERVATION DIVISION
PO Box 2088
Santa Fa NM 87504-2088

Instructions on back Submit to Appropriate District Office 5 Copies

1000 Rio Re ne Rd., Arter, NM 27410

District III

District IV					Santa	re, NM	1 8750	4-2088				AMI	ENDED REPOR	
PO Box 2088, 8 I.	enta Fe,				LLOWA	ABLE AI	ND AI	UTHOR	IZAT	ION TO T	RANSI	_		
Operator name and Address										<sup>2</sup> OGRID Number				
Meridian Oil Inc.										26485 * Reason for Filing Code				
P.O. Box 51810 Midland, Tx 79710-1810										RC				
<b>API Number</b> 30 - 0 25-32176 West Tr						'Pool Name Triste Draw Delaware				* Pool Code * 96035- 57995				
' Property Code 13280				Litt	roperty Name eral			-	#	* Well Number				
		_	ocation	1			<del>,,,</del> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<del>-</del>					· · · · · · · · · · · · · · · · · · ·	
Ul or lot no. Section  J 30		•	Township 23S	Range Lot.Idn 32E		Feet from the		North/South Line South		Feet from the East/Wes 2310' East				
		m Hole Lo				1300		3000		2310	East		Lea ————	
UL or lot no.	UL or lot no. Section Same As Sur		Township		Lot Idn	Feet fro	m the	North/South line		Feet from the	East/West line		County	
12 Lee Code				Code 14 Gas	Connection I	Date 15 C	C-129 Permit Number		C-129 Effective	Date	e 17 C-129 Expiration Da			
II. Oil a	nd G	as T	ranspo	rters									<del></del>	
	Transporter OGRID		19 Transporter Name and Address					<sup>28</sup> POD <sup>21</sup> O/G		<sup>22</sup> POD ULSTR Location and Description				
007440	007440		TT	1100				809010		Ut. J. S	Ut. J. Sec. 30, T23S, R			
		۲.	0. Box	1188 Hc	188 Houston, Tx							,		
009171		4004					2809011 G			Ut. J, Sec. 30, T23S, R32E				
	4001 Penbrook Odessa, Tx													
						107 100	20.21112132							
					<del></del>									
0.00000000	es (54					55	e de la companie de							
V. Prodi	uced '	Wat	er	<del></del>								<del></del>		
	POD		Wes	t Jal Di	spcsal			LSTR Locat			.25	s / O	709	
Permit			G,	Sec. 10,	T25S,	R36E, L	ea CO	., hau	led by	/ Rapid Tr	anspor	^ts_	•	
V. Well Comp "Spud Date 12/27/93		neu	on Data	24 Ready Date			" TD	27 TD		21 PBTD	2º Perforations			
				3/17/94		97	58 '		CIBP @ 8600		7248-7310			
Hole Size					oing Size	<del></del>			Depth Set		<sup>33</sup> Sacks Cement			
17 1/2" 12 1/4"				13 3/8" 48#			6021					)_sxs		
7 7/8"		- <u></u>	3 5/8" 32#, 5 1/2" 17#				4502' 9755'					SXS		
, .				<del>  J 1</del> /	<u> </u>		_	9/ 55	)		140	00 sx	s	
I. Well		Dat							·· · · · · · · · · · · · · · · · · · ·	l		•		
* Date New Oil 3/18/94			<sup>36</sup> Gas Delivery Date		* Test Date 4/23/94		" Test Length		igth	M Tbg. Pro	essure	•		
" Choke Size		$\dashv$	41 Oil		4/23/94 4 Water		24			" AOF		60		
64"			150		350		119		, and a		P P			
with and that th	e infohm	e rule ation g	s of the Oil iven above	Conservation D is true and comp	ivision have b	een complied st of my		OI	L CO	NSERVATI	ON D	IVIST	ON	
knowledge and Signature:	C C	)	5				Approve		DIST					
Printed name: Donna W	کس illia	ms					Title:	€,	SRIC -					
Product			stant				Approvi	d Date:	ΜΔΥ	0 3 1994		**		
Phone: 915-688-6943									1 17/1	דייטו פיע		· · · · · · · · · · · · · · · · · · ·		
" If this is a cl	ange of	opera	tor fill in t	he OGRID nun	ber and nan	ne of the prev	ious opera	ntor					. 33	
	Previou	ıs Op	erator Sign	ature			Print	ed Name			Title	<u> </u>	Date	

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## New Mexico Oil Conservation Division C-104 Instructions

## IF THIS IS AN AMENDED REPORT, CHECK THE BOX LABLED "AMENDED REPORT" AT THE TOP OF THIS DOCUMENT

Report all gas volumes at 15.025 PSIA at 60°. Report all oil volumes to the nearest whole bar

A request for allowable for a newly drilled or deepened well must be accompanied by a tabulation of the deviation tests conducted in accordance with Rule 111.

All sections of this form must be filled out for allowable requests on ind recompleted we

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.

A separate C-104 must be filed for each pool in a multiple completion.

improperly filled out or incomplete forms may be returned to operators unapproved.

- Operator's name and address
- Operator's OGRID number. If you do not have one it will be assigned and filled in by the District office. 2.
- 3.

Reason for filing code from the following table:

NW New Well

RC Recompletion

CH Change of Operator

AO Add oil/condensate transporter

CO Change oil/condensate transporter

AG Add gas transporter

CG Change gas transporter

RT Request for test allowable (Include volume requested)

If for any other reason write that reason in this box.

If for any other reason write that reason in this box.

- 4. The API number of this well
- The name of the pool for this completion 5.
- 6. The pool code for this pool
- The property code for this completion 7.
- The property name (well name) for this completion 8.
- The well number for this completion 9.
- The surface location of this completion NOTE: If the 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. 10.
- The bottom hole location of this completion 11.
- Lease code from the following table:
  F Federal
  S State
  P Fee
  J Jicarilla 12.

NU

Navajo Ute Mountain Ute Other Indian Tribe

The producing method code from the following table: 13.

Pumping or other artificial lift

- MO/DA/YR that this completion was first connected to a 14. gas transporter
- The permit number from the District approved C-129 for this completion 15.
- MO/DA/YR of the C-129 approval for this completion 16.
- MO/DA/YR of the expiration of C-129 approval for this 17.
- The gas or oil transporter's OGRID number 18.
- 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.

Oil Gas

- The ULSTR location of this POD if it is different from the well completion location and a short description of the POD (Example: "Battery A", "Jones CPD",etc.) 22.
- The POD number of the storage from which water is moved from this property. 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. 23.
- The ULSTR location of this POD if it is different from the well completion location and a short description of the POD (Example: "Battery A Water Tank", 'Jones CPD Water Tank", etc.) 24.
- MO/DA/YR drilling commenced 25.
- 26. MO/DA/YR this completion was ready to produce
- Total vertical depth of the well 27.
- 28. Plugback vertical depth
- Top and bottom perforation in this completion or casing shoe and TD if openhole 29.
- 30. Inside diameter of the well bore
- Outside diameter of the casing and turing 31.
- Depth of casing and tubing. If a casin; liner show top and 32.
- 33. Number of sacks of cement used per casing string

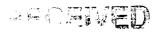
The following test data is for an oil well it niust be from a test conducted only after the total volume of load oil is recovered.

- MO/DA/YR that new oil was first produced 34.
- 35. MO/DA/YR that gas was first produced into a pipeline
- MO/DA/YR that the following test was completed 36.
- Langth in hours of the test 37
- Flowing tubing pressure oil wells Shut-in tubing pressure gas wells 38.
- Flowing casing pressure oil wells Shut-in casing pressure gas wells 39.
- 40. Diameter of the choke used in the test
- 41. Barrels of oil produced during the tes
- Barrels of water produced during the test 42.
- MCF of gas produced during the test
- Gas well calculated absolute open flow in MCF/D 44.
- The method used to test the well: 45

Flowing

P Pumping
S Swabbing
If other method please write it in.

- The signature, printed name, and title of the person authorized to make this report, the date this report was signed, and the telephone number to call for questions about this report 46
- 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 late this report was signed by that person 47.



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