

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES RETURNED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.O.E.	
LAND OFFICE	
TRANSPORTER	
OIL	
GAS	
OPERATOR	
PRODUCTION OFFICE	

Operator Meridian Oil Inc.

Address 21 Desta Drive Midland, Texas 79705

Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well ☐	Change in Transporter of:	Meridian Oil Inc. is Operator for El Paso Production Company	
Recompletion ☐	Oil ☐ Dry Gas ☐		
Change in Operator ☒ Operator	Casinghead Gas ☐ Condensate ☐		

If change of ownership give name and address of previous owner El Paso Natural Gas Co., 1800 Wilco Building, Midland, Tx 79701

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Cagle "B"</u>	Well No. <u>2</u>	Pool Name, including Formation <u>Rhodes Storage (Y-7R)</u>	Kind of Lease State, Federal or Free <u>Federal LC-030176-B</u>
Location			
Unit Letter <u>M</u>	<u>660</u>	Feet From The <u>South</u>	Line and <u>660</u>
Feet From The <u>West</u>			
Line of Section <u>15</u>	To Township <u>26S</u>	Range <u>37E</u>	County <u>Lea</u>

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)
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)
<u>El Paso Natural Gas Co.</u>	<u>P. O. Box 1492, El Paso, Texas 79978</u>
If well produces oil or liquids, give location of tanks.	Is gas actually collected? When
Unit <u>M</u> Sec. <u>15</u> Twp. <u>26S</u> Rge. <u>37E</u>	<u>Yes</u> <u>Unknown</u>

IV. 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.

Carly Zober
(Signature)

Engineering Tech III

11/5/86
(Date)

OIL CONSERVATION DIVISION

APPROVED [Signature]

BY ORIGINAL SIGNED BY JERRY TAYLOR

TITLE DISTRICT SUPERVISOR

This form is to be filed in compliance with N.M.C. 70-1-1.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the density tests taken on the well in accordance with N.M.C. 70-1-1.

All sections of this form must be filled out completely for all wells on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of name, well name or number, or transporter or other such change of ownership.

Separate Forms C-104 must be filed for each pool in newly recompleted wells.

RECEIVED
NOV 10 1986
O-13
HOBBS OFFICE