

OIL CONSERVATION DIVISION

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator MERIDIAN OIL INC.	Well API No. 30-025-31382
Address P.O. Box 51810, Midland, TX 79710-1810	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
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 MYERS B	Well No. 6	Pool Name, Including Formation JALMAT-TANSIL-YATES-7RIVERS	Kind of Lease State, Federal or Fee FEDERAL	Lease No. NM-12611
Location				
Unit Letter A	660	Feet From The NORTH	Line and 660	Feet From The EAST
Section 11	Township 24-S	Range 36-E	NMPM,	LEA County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)			
Well not making condensate				
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)			
Sid Richardson Carbon & Gasoline Co.	201 Main St., First City Bank Tower,			
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.
Is gas actually connected?	When ?		Ft. Worth, TX 76102	
Yes	10-17-91			

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 X	New Well X	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 9-29-91	Date Compl. Ready to Prod. 10-6-91	Total Depth 3620'	P.B.T.D. 3573'					
Elevations (DF, RKB, RT, GR, etc.) 3350.5' GR	Name of Producing Formation YATES-7 RIVERS	Top Oil/Gas Pay 2989	Tubing Depth 2-3/8" @2970'					
Perforations 2989'-3473'	Depth Casing Shoe 3620'							
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE 12-1/4"	CASING & TUBING SIZE 8-5/8"	DEPTH SET 429'	SACKS CEMENT 300 SXS C					
7-7/8"	4-1/2"	3620'	930 SXS C & LITE					

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 252 AOF	Length of Test 24 HRS - 4-PT	Bbls. Condensate/MMCF 0	Gravity of Condensate -
Testing Method (prior, back pr.) PUMPING GAS WELL	Tubing Pressure (Shut-in) 40#	Casing Pressure (Shut-in) 40#	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.

Signature Maria L. Perez
Printed Name MARIA L. PEREZ
Date 12-23-91
Title PROD. ASST.
Telephone No. 915-688-6906

OIL CONSERVATION DIVISION

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.