

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

State of New Mexico  
gy, Minerals and Natural Resources Department

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

## OIL CONSERVATION DIVISION

DISTRICT II  
P.O. Drawer DD, Artesia, 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

Operator MERIDIAN OIL INC.	Well API No. 30-025-31463
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

59-622

GAS OPERATIONS	
RECEIVED	
JAN 7 1992	
WJF	SIG
BMW	SAC
DCT	

#### II. DESCRIPTION OF WELL AND LEASE

Lease Name C. W. SHEPHERD FEDERAL	Well No. 9	Pool Name, Including Formation RHODES-YATES-7 RIVERS	Kind of Lease State, Federal or Fee FEDERAL	Lease No. LC-030177-B
Location Unit Letter <u>K</u> : 1980 Feet From The <u>WEST</u> Line and <u>1930</u> Feet From The <u>SOUTH</u> Line Section <u>5</u> Township <u>26-S</u> Range <u>37-E</u> , 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"/> NO CONDENSATE PRODUCED	Address (Give address to which approved copy of this form is to be sent)					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> SID RICHARDSON CARBON & Gasoline	Address (Give address to which approved copy of this form is to be sent) 201 MAIN ST., FIRST CITY BNK. TWR.,					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected? YES	When? 12-30-91

If this production is commingled with that from any other lease or pool, give commingling order number:

#### IV. COMPLETION DATA SID RICHARDSON GASOLINE CO. - Eff 3/1/93

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
		X	X					
Date Spudded 11-25-91	Date Compl. Ready to Prod. 12-1-91		Total Depth 3100'		P.B.T.D. 3041'			
Elevations (DF, RKB, RT, GR, etc.) 2979.7' GR	Name of Producing Formation YATES		Top Oil/Gas Pay 2771'		Tubing Depth 2-3/8" @ 2750'			
Perforations 2771'-2943'					Depth Casing Shoe 3100'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	8-5/8"		418'		300 SXS - SURFACE			
7-7/8"	4-1/2"		3100'		800 SXS - SURFACE			

#### 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 2990 AOF	Length of Test 24 HRS	Bbls. Condensate/MMCF 0	Gravity of Condensate
Testing Method (pilot, back pr.) BACK PR.	Tubing Pressure (Shut-in) 470#	Casing Pressure (Shut-in) 330#	Choke Size 28/64"

#### 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  
MARIA L. PEREZ PROD. ASST.  
Printed Name  
12-30-91 Title  
915-688-6906  
Date Telephone No.

#### OIL CONSERVATION DIVISION

Date Approved DEC 30 1991

By ORIGINAL SIGNED BY ARRY SEXTON  
DISTRICT I SUPERVISOR

Title  
FOR RECORD ONLY

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.

**RECEIVED**

**APR 28 1993**

**OCD HOBBS CT 02**