

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

OIL CONSERVATION DIVISION

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. 30-025-31614

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

Reason(s) for Filing (Check proper box) ☐ Other (Please explain)  
New Well ☒ Change in Transporter of:  
Recompletion ☐ Oil ☐ Dry Gas ☐  
Change in Operator ☐ Casinghead Gas ☐ Condensate ☐

If change of operator give name  
and address of previous operator

II. DESCRIPTION OF WELL AND LEASE

Lease Name C.W. Shepherd "A" Federal	Well No. 2	Pool Name, Including Formation Rhodes-Yates-7 Rivers (Gas)	Kind of Lease <del>XXX</del> Federal or <del>XXX</del>	Lease No. LC-030177-A
Location Unit Letter H : 1650 Feet From The North Line and 660 Feet From The East Line Section 6 Township 26-S Range 37-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"/> Texaco will send notice of oil transporter data	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 Crabon & Gas Co	Address (Give address to which approved copy of this form is to be sent) 201 Main ST Ste 3000 Ft Worth TX 76102
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When ? yes 7-27-92

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	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
		X	X					
Date Spudded 6/16/92	Date Compl. Ready to Prod. 6/22/92	Total Depth 3080'	P.B.T.D. 2784'					
Elevations (DF, RKB, RT, GR, etc.) 2976.7 GR	Name of Producing Formation Yates	Top Oil/Gas Pay 2798'	Tubing Depth 2784'					
Perforations 2798'-2907' Yates			Depth Casing Shoe					

TUBING, CASING AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	8-5/8"	431'	500 SXS
7-7/8"	4-1/2"	3068'	900 SXS
	2-3/8"	2784'	

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 7/14/92 24,344.8	Length of Test 24 hr	Bbls. Condensate/MMCF AOE-24.3448	Gravity of Condensate -
Testing Method (pitot, back pr.) back press	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size 24/64"

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 Roxann Scholz Production Asst.  
Printed Name Roxann Scholz Title  
Date 7/27/92 Telephone No. (915)688-6943

OIL CONSERVATION DIVISION

JUL 31 '92

Date Approved

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.