Submit 5 Copies Appropriate District Office <u>DISTRICT 1</u> P.O. Box 1980, Hobbs, NM 88240 <u>DISTRICT 11</u> P.O. Drawer DD, Antesia, NM 88210 DISTRICT 11	State of New Mexico Energy, Minerals and Natural Resources Department OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, New Mexico 87504-2088									Form C-104 Revised 1-1-89 See Instructions at Bottom of Page		
DISTRICT III 1000 Rio Brazos Rd., Azzec, NM 87410 I.	REQU	EST FC		LLOWA	BLE AN		HORI	ZATION				
Operator					LAND	NATUR	AL G	Well	API No.	<u> </u>		
Address	MERIDIAN OIL INC								-025-23883 DK			
Reason(s) for Filing (Check proper box) New Well					0, MII	OLAND, Other (Plea			01810			
Recompletion	C Oil Casinghead (Franspo Dry Ga Condes	• 🗌								
If change of operator give nameUN	ION TEXAS	PETRO	DLEU	M, P.O	. BOX	2120,	Hous	ton, TX	77252			
IL DESCRIPTION OF WELL												
Langlie Jal Unit	V	47	Lan	glie M	i ng Formati attix	an (SRQ)		Kind State	of Lease Federal or Fe		115870	
Unit LetterF	. 1980		ied Pa	m The	_N	Line and _	188	5F	et From The	W	Line	
Section 5 Towash	p 25S	I	Lange	<u>37e</u>		NMPM,		Lea			County	
III. DESIGNATION OF TRAN Name of Authorized Transporter of Oil	~		. ANI	D NATU	RAL GA	s In	je	ctio				
Shell Pipeline Company	₩				Address (Give address to which approved P.O. Box 2648, Houston				TX 77252			
Name of Authorized Transporter of Casia Sid Richardson Carbon		X ∘ ∘.	r Dry (Ges	Address (Give addres	a to wi	ick approved	orth, T	form is to be si		
If well produces oil or liquide, give location of tanks.	Unit Se	с. Т	Wp.	Rge.	ls gas ach			When		10102		
If this production is commingled with that	from any other i	lease or po	ol, givi	comming	ing order p	mber:						
IV. COMPLETION DATA		Dil Well		as Well	New We			Davage	Dive Deeb			
Designate Type of Completion	- (X)		i		Ĺ	i		Despez	Plug Back	Same Res'v	Diff Res'v	
•	Date Compt. I	Cendy to P	od.		Total Depth				P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Prode	Name of Producing Formation				Top Oil/Gas Pay				Tubing Depth		
Perforations	L			<u> </u>				,,,,,,,	Depth Casin	g Shoe	<u></u> _	
	TUI	BING. C	ASIN	G AND	CEMEN	TNG RE	CORI	<u></u>	1			
HOLE SIZE		CASING & TUBING SIZE				DEPTH SET				SACKS CEMENT		
······································					-							
. TEST DATA AND REQUES												
DIL WELL (Test must be after re Date First New Oil Run To Tank	Date of Test	volume of l	oad ou	and must				vable for this np, gas lift, e		or full 24 hou	75.)	
Length of Test	T 1 :								-		<u></u> .	
	Tubing Pressure				Casing Pressure				Choke Size			
Actual Prod. During Test	Oil - Bbls.				Water - Bbis.				Gas- MCF			
GAS WELL	<u></u>		<u> </u>						· · · · · · · · · · · · · · · · · · ·			
Actual Prod. Test - MCF/D	Length of Test				Bbis. Condensate/MMCF				Gravity of Condensate			
esting Method (pilot, back pr.)	Tubing Pressure (Shis-m)				Casing Pressure (Shue-in)				Choke Size			
I. OPERATOR CERTIFIC	ATE OF CO		ANC									
I hereby certify that the rules and regula	tions of the Oil (Conservatio	00			OILC	ON	SERVA		DIVISIO	N	
Division have been complied with and that the information gives above is true and complete to the best of my knowledge and belief.					Dat	e Appr	oved		OCT 2	2 8 199	ĺ	
- Charles - Charles												
Signature	Terrina a) I i d	4	le for	By.	UKIG			Y JERVISOI			
Printed Name			le	<u> </u>								
14 1257	21 mg 1 2			\$/ I	Title	∍						
Date	212) E	Telepho	70	2	l itie	€						

with Rule 111.

All sections of this form must be filled out for allowable on new and recompleted wells.
Fill out only Sections L II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
Separate Form C-104 must be filed for each real in must be real in must be filed for each real in must be filed.

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