Submet 5 Courses Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico nnergy, Minerais and Natural Resources Department

DISTRICT II
DO Deswer DD Artessa NM 88210

OIL CONSERVATION DIVISION

C-104 Revised 1-1-89	
see instructions	
at Bottom of Pag	e

P.O. Drawer DD. Ariena, NM 88210		. DOX 2088	
DISTRICT III	Sania Fe. Nev	Mexico 87504-2088	
1000 Rio Brazos Rd., Aztec. NM 87410	DECLIERT FOR ALL OF	ARLE AND AUTHORIZATION	
I.		# SLE AND AUTHORIZATION	
Operator	IO TRANSPORT	OIL AND NATURAL GAS	
,			API No.
MERIDIAN OIL INC	Z	٥٤	-025-2608109
Address			
P. O. BOX 51810.	MIDLAND, TX 79710-	810	
Reason(s) for Filing (Check proper box)	·	X: Other (Please expiain)	
New Well	Change in Transporter of	 To correct Gas Gather 	rer from El Paso Natural
Recompletion	Oil Dry Gas		rdson Carbon & Gasoline
Change in Operator	Casingheed Gas . Condensuse	- Company.	ruson carbon & Gasoline
If change of operator give name:		COMPANY	
sad address of brevious oberstor.			
IL DESCRIPTION OF WELL	AND LEASE		
Lease Name	Well No. Pool Name, in	hiding Formation Kind	i of Lease No.
Etz	2 50/10	+ Tonsill / + T.R SIM	L. Federal of Fee
Location		() (3) () /) / ()	
13-12 100	: 23/0 Feet From Th	1/30	h /
Unit Letter	Feet From The	Line and 430	Feet From TheLine
Section 7 Townshi	11,0 - 7	7-E NMPM (ea	
	p 25'5 Ramage 3	, NMPM. CECC	County
III DESIGNATION OF THE AN	//// ADDITION OF AN AND AND AND AND AND AND AND AND AND		
Name of Authorized Transporter of Oil	SPORTER OF OIL AND NA		
A AMERICAN TRANSPORT OF COL		Address (Give address to which approve	id copy of this form is to be sent)
Jerrioch Terme	en Corp		
Interes of Authorized Transporter of Casing	phend Gas	Address (Give address to which approve	ed copy of this form is to be seen)
Sid Richardson Carbon	& Gasoline Co.	201 Main Street, Ft.	Worth, TX 76102
If well produces oil or liquids,		gs. is gas actually connected? Whe	m ?
give location of train.	1 6 1 7 1 25 1 3	7 420 1	12-1-78
If this production is commissied with that	from any other lease or pool, give come	ingling order number:	
IV. COMPLETION DATA	, -		
	Oil Well Gas We	New Well Workover Despen	Plug Back Same Res'v Diff Res'v
Designate Type of Completion	- (X)		
Date Spudded	Date Compt. Ready to Prod.	Total Depth	P.B.T.D.
		•	1.41.4.
l	i e		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Death
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Elevations (DF, RKB, RT, GR, atc.) Perforations	Name of Producing Formation	Top Oil/Gas Pay	
	Name of Producing Formston	Top Oil/Gas Pay	Tubing Depth Depth Casing Shoe
Perforations	TUBING, CASING A	ID CEMENTING RECORD	Depth Casing Shoe
Perforations	TUBING, CASING A	ID CEMENTING RECORD	Depth Casing Shoe
Perforations	TUBING, CASING A	ID CEMENTING RECORD	Depth Casing Shoe
Perforations	TUBING, CASING A	ID CEMENTING RECORD DEPTH SET	Depth Casing Shoe
Perforations HOLE SIZE	TUBING, CASING A CASING & TUBING SIZE	ID CEMENTING RECORD DEPTH SET	Depth Casing Shoe
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INSTRUCTIONS: This form is to be filled 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.

 21. 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 filled for each pool in multiply completed wells.