District [

PO Box 1980, Hobbs, NM 88241-1980 District II

811 S. Ist Street, Artesia, NM 88210-2834 District III

1000 Rio Brazos Rd., Aztec, NM 87410

District IV

## State of New Mexico E y, Minerals & Natural Resources Department

Revised February 10, 1994 Instructions on back Submit to Appropriate District Office

OIL CONSERVATION DIVISION P.O. Box 2088

Santa Fe, NM 87504-2088

RT

Form C-104

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		<sup>1</sup> Oper	ator name a	nd Address					OGRID Number		
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P.O. Box 51810						3 n.			026485 Season for Filing C	ode	
Midland, TX 79710-1810					<i></i>			141	<sup>3</sup> Reason for Filing Code CH 8-1-96		
4	API Number				<sup>5</sup> Pool I	lame		7.1		Pool Code	
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Submit 5 Coxes Appropriate District Office
DISTRICT 1
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Litergy, Minerais 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

58233

I. TO TRANSPORT OIL AND NATURAL GAS  Operator  MERIDIAN OIL INC.  Address  P. O. BOX 51810, MIDLAND, TX 79710-1810  Remotes to Friling (Check proper doc)  New Well  Change in Transporter of:  Oil Dry Gas Gas Co. to Sid Richardson Carbon & Gasoline  Change in Operator  Oil Dry Gas Gas Co. to Sid Richardson Carbon & Gasoline  Change of operator gree beam and address of previous operator  Usit Longer of operator  Well New Well  Long of operator gree beam and address of previous operator  Usit Long of Operator  Very Company  III. DESCIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  Name of Authorized Transporter of Oil Operator  Sociol 14 Township  Occupant  Occupant  Address Give address to whick approved copy of this form us to be sens)  Address Give address to whick approved copy of this form us to be sens)  Address Give address to whick approved copy of this form us to be sens)  III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  Name of Authorized Transporter of Caingleman One.  Or Dry Gas (X)  Address Give address to whick approved copy of this form us to be sens)  Address Give address to whick approved copy of this form us to be sens)  Address Give address to whick approved copy of this form us to be sens)  To Completion of tests.  Using produces and or legislate.  Using became of tests.  Using produces and or legislate.  Using produces and or legislate.  Using produces and or legislate.  Using became of tests.  Using produces and or legislate.  Using became of tests.  One of tests of tests of tests of tests of tests of tests.  One of tests of	DISTRICT III 1000 Rio Brazos Rd., Azzec, NM 87410	1			VIEXICO 87304-2088		_	,,,,,,	J		
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DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS   Name of Authorized Transporter of Oil	,			. rest from the 3	<u> </u>		et rom me				
Name of Authorized Transposeer of Oil  or Condenses  Address (Give address to which approved copy of this form as to be seen)  S.I.d. Richardson, Carbern-6, Gaso) Inc. Co.  S.I.d. Richardson, Carbern-6, Gaso) Inc. Co.  201 Main Street, Ft. Worth, TX 76102  I well produces of injusies.  Use: See. Twp. Res. It specially consensity consenses When 7 - 7-99  If the production is commaniped with that from any other lease or pool, give commanding order standard.  IV. COMPLETION DATA SID RICHARDSON GASOLINE CO. E. 17733  Designate Type of Completion - (X)  Oil Well Cas Well New Well Workover Designate Plants Same Ret V. Diff Ret V. Distances (DF, RES, RT, GR, etc.)  Name of Producing Formation  TUBING. CASING AND CEMENTING RECORD  HOLE SIZE  CASING A TUBING SIZE  DEPTH SET  SACKS CEMENT  V. TEST DATA AND REQUEST FOR ALLOWABLE  DIL WELL (Test must be apper recovery of total volume of load oil and must be equal to or excend top allowable for this depth or be for full 74 hours.)  Date First New Oil Rus To Task  Date of Test  Tables Pressure  Casing Pressure  Casing Pressure  Casing Pressure  Casing Pressure  Casing Pressure (Stat-in)  Case MCF  Oil CONSERVATION DIVISION  FEB 0 5 '92  Date of Title  Separation  Oil Conservation  Division have been computed with and that the information gives above it is two and completes to the best of my knowledge and balled.  Title  Title	Section 14 Towns	<b>iii</b> 025	5	Range 03	7E, NMPM,			<u>L</u> ea	County		
Name of Authorized Transposeer of Oil  or Condenses  Address (Give address to which approved copy of this form as to be seen)  S.I.d. Richardson, Carbern-6, Gaso) Inc. Co.  S.I.d. Richardson, Carbern-6, Gaso) Inc. Co.  201 Main Street, Ft. Worth, TX 76102  I well produces of injusies.  Use: See. Twp. Res. It specially consensity consenses When 7 - 7-99  If the production is commaniped with that from any other lease or pool, give commanding order standard.  IV. COMPLETION DATA SID RICHARDSON GASOLINE CO. E. 17733  Designate Type of Completion - (X)  Oil Well Cas Well New Well Workover Designate Plants Same Ret V. Diff Ret V. Distances (DF, RES, RT, GR, etc.)  Name of Producing Formation  TUBING. CASING AND CEMENTING RECORD  HOLE SIZE  CASING A TUBING SIZE  DEPTH SET  SACKS CEMENT  V. TEST DATA AND REQUEST FOR ALLOWABLE  DIL WELL (Test must be apper recovery of total volume of load oil and must be equal to or excend top allowable for this depth or be for full 74 hours.)  Date First New Oil Rus To Task  Date of Test  Tables Pressure  Casing Pressure  Casing Pressure  Casing Pressure  Casing Pressure  Casing Pressure (Stat-in)  Case MCF  Oil CONSERVATION DIVISION  FEB 0 5 '92  Date of Title  Separation  Oil Conservation  Division have been computed with and that the information gives above it is two and completes to the best of my knowledge and balled.  Title  Title											
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If this production is commissified with that from any other lease or pool, give commission of contents.  IV. COMPLETION DATA SID BRONDERSON GASOLINE CO. EV. 07/93  Designate Type of Completion - (X) OB Well Gas Well New Well Workover Despese Plug Back [Same Reav Diff Reav Date Spatided  Date Complet. Ready to Producing Formation  Total Depth P.B.T.D.  Revisions (DF, RKS, RT, GR, stc.) Name of Producing Formation  TUBING, CASING AND CEMENTING RECORD  HOLE SIZE GASING & TUBING SIZE DEPTH SET SACKS CEMENT  V. TEST DATA AND REQUEST FOR ALLOWABLE  DIL WELL (Till name to a spir recovery of total volume of load oil and must be equal to or excent top allomable for this depth or be for full 24 hours.)  Date Firm New Oil Run To Tank Date Test  Langeth of Test Date Total Producing Method (Flow, pump. per lift, etc.)  Casing Pressure Chains From MCF/D  Langeth of Test Oil - Bibls. Water - Bibls. Gas-MCF  GAS WELL  Assess Frod. Test - MCF/D  Langeth of Test  Oil - Bibls. Condemnation/MMCF  Convey of Condemnate.  VI. OPERATOR CERTIFICATE OF COMPLIANCE 1 howely certify that the resists and regulations of the total of the state of the season of the best of my taxoriming and belief.  Superstance  OIL CONSERVATION DIVISION FEB 0 5 '92  Date Approved  Title  Title	If well produces oil or liquids						2	_			
Designate Type of Completion - (X)  Despitation Name  Producing Method (Plow, pump, gas lift, etc.)  Designate Type of Completion - (X)  Despitation Name  Producing Method (Plow, pump, gas lift, etc.)  Despitation Name  Producing Method (Plow, back pr.)  District I super Name of Completion and that the information gives above in true and complete to the bost of my knowledge and belief.  Title  Designate Type of Confidence in the completion of the OR Compression of the OR	give location of traks.	_i_ i		i i i		i	12-7.	-79			
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Designate Type of Completion - (X)  Date Speaked  Date Compl. Ready to Prod.  Total Depth  P.B.T.D.  Total Depth  P.B.T.D.  Total Depth  P.B.T.D.  Total Depth  Depth Casing Depth  Depth Casing Shoe  TUBING, CASING AND CEMENTING RECORD  HOLE SIZE  CASING & TUBING SIZE  DEPTH SET  SACKS CEMENT  V. TEST DATA AND REQUEST FOR ALLOWABLE  DIL WELL  (Test ment 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.)  Dates First New Oil Rus To Trank  Dates of Test  Dates of Test  Tubing Pressure  Casing Pressure  Casing Pressure  Casing Pressure  Choka Size  Water - Bbls.  Gas- MCF  GAS WELL  Actual Prod. Test - MCF/D  Langth of Test  Water - Bbls.  Gas- MCF  Gravity of Condensate  Fill Defined New boar complete the and registations of the Oil Conservation  FEB 0 5 '92.  Date Approved  By ORIGINAL SIGNED BY JERRY SEXTON  DISTRICT I SUPERVISOR  Title  Title	IV. COMPLETION DATA 3	ID RICH	<u> PRDS</u>	DN GASOL	JINE CO Etc. 3/1	/93					
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HOLE SIZE  CASING & TUBING SIZE  DEPTH SET  SACKS CEMENT  V. TEST DATA AND REQUEST FOR ALLOWABLE  OIL WELL  (Test must be after recovery of total volume of load oil and must be aqual to or exceed top allowable for this depth or be for full 24 hours.)  Date of Test  Date of Test  Date of Test  Producing Method (Flow, pump, gas lift, etc.)  Langth of Test  Oil - Bbls.  Casing Pressure  Casing Pressure  Casing Pressure  Choks Size  Water - Bbls.  Gas-MCF  Gravity of Condensate.  VI. OPERATOR CERTIFICATE OF COMPLIANCE  I ben'dy 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  Connie L. Malik, Regulatory Compliance Rep. Pristal Name  Title  Title  Title  Title  Title	Perforations						Depth Casi	ng Shoe	. <u></u>		
HOLE SIZE  CASING & TUBING SIZE  DEPTH SET  SACKS CEMENT  V. TEST DATA AND REQUEST FOR ALLOWABLE  OIL WELL  (Test must be after recovery of total volume of load oil and must be aqual to or exceed top allowable for this depth or be for full 24 hours.)  Date of Test  Date of Test  Date of Test  Producing Method (Flow, pump, gas lift, etc.)  Langth of Test  Oil - Bbls.  Casing Pressure  Casing Pressure  Casing Pressure  Choks Size  Water - Bbls.  Gas-MCF  Gravity of Condensate.  VI. OPERATOR CERTIFICATE OF COMPLIANCE  I ben'dy 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  Connie L. Malik, Regulatory Compliance Rep. Pristal Name  Title  Title  Title  Title  Title							<u> </u>				
V. TEST DATA AND REQUEST FOR ALLOWABLE  DILL 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.)  Langth of Test  Oil - Bhis.  Oil - Gravity of Condennate.  Oil - Gravity of Condennate.  Oil - Condennate of Condennate 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  Connie L. Malik. Regulatory Compliance Rep.  Title  Title  Title  Title		- y		<del></del>			<del></del>				
DIL WELL  (First mean be after recovery of total volume of load oil and mean be equal to or exceed top allowable for this depth or be for full 24 hours.)  Date of Test  Date of Test  Producing Method (Flow, pump, gas lift, etc.)  Length of Test  Choke Size  Actual Prod. During Test  Oil - Bbis.  Water - Bbis.  Gas- MCF  GAS WELL  Actual Prod. Test - MCF/D  Length of Test  Bbis. Condennant/MMCF  Gravity of Condennante.  Cating Pressure (Shizi-in)  Choke Size  VI. OPERATOR CERTIFICATE OF COMPLIANCE  I hereby certify that the roles 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.  Signeture  Connic L. Malik, Regulatory Compliance Rep. Pristed Name  Title  Title  Title  Title  Title	HOLE SIZE	CAS	ING & TU	JBING SIZE	DEPTH SI	EI	<u> </u>	SACKS CEM	ENT		
DIL WELL  (First mean be after recovery of total volume of load oil and mean be equal to or exceed top allowable for this depth or be for full 24 hours.)  Date of Test  Date of Test  Producing Method (Flow, pump, gas lift, etc.)  Length of Test  Choke Size  Actual Prod. During Test  Oil - Bbis.  Water - Bbis.  Gas- MCF  GAS WELL  Actual Prod. Test - MCF/D  Length of Test  Bbis. Condennant/MMCF  Gravity of Condennante.  Cating Pressure (Shizi-in)  Choke Size  VI. OPERATOR CERTIFICATE OF COMPLIANCE  I hereby certify that the roles 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.  Signeture  Connic L. Malik, Regulatory Compliance Rep. Pristed Name  Title  Title  Title  Title  Title					1		<del></del>				
DIL WELL  (First mean be after recovery of total volume of load oil and mean be equal to or exceed top allowable for this depth or be for full 24 hours.)  Date of Test  Date of Test  Producing Method (Flow, pump, gas lift, etc.)  Length of Test  Choke Size  Actual Prod. During Test  Oil - Bbis.  Water - Bbis.  Gas- MCF  GAS WELL  Actual Prod. Test - MCF/D  Length of Test  Bbis. Condennant/MMCF  Gravity of Condennante.  Cating Pressure (Shizi-in)  Choke Size  VI. OPERATOR CERTIFICATE OF COMPLIANCE  I hereby certify that the roles 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.  Signeture  Connic L. Malik, Regulatory Compliance Rep. Pristed Name  Title  Title  Title  Title  Title		<u> </u>	<del></del>	<del></del>	<del></del>		1	<del></del>	<del></del>		
DIL WELL  (First mean be after recovery of total volume of load oil and mean be equal to or exceed top allowable for this depth or be for full 24 hours.)  Date of Test  Date of Test  Producing Method (Flow, pump, gas lift, etc.)  Length of Test  Choke Size  Actual Prod. During Test  Oil - Bbis.  Water - Bbis.  Gas- MCF  GAS WELL  Actual Prod. Test - MCF/D  Length of Test  Bbis. Condennant/MMCF  Gravity of Condennante.  Cating Pressure (Shizi-in)  Choke Size  VI. OPERATOR CERTIFICATE OF COMPLIANCE  I hereby certify that the roles 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.  Signeture  Connic L. Malik, Regulatory Compliance Rep. Pristed Name  Title  Title  Title  Title  Title						·	:	<del></del>			
Date First New Oil Run To Tank  Date of Test  Indiang Pressure  Casing Pressure  Choke Size  Actual Prod. During Test  Oil - Bibls.  Water - Bibls.  Gas- MCF  Gas- MCF  Gas- MCF  Gas- MCF  Gas- MCF  Gas- MCF  Cating Method (picot, back pr.)  Indiang Pressure (Shut-in)  Caning Pressure (Shut-in)  Caning Pressure (Shut-in)  Caning Pressure (Shut-in)  Caning Pressure (Shut-in)  Oil CONSERVATION DIVISION  Division have been complete to the best of my knowledge and betief.  Signature  Connie L. Malik, Regulatory Compliance Rep.  Printed Name  Title  Title  Title	V. TEST DATA AND REQUE	ST FOR A	LLOW	ABLE	<del>!</del>	-	-7		······································		
Length of Text    Tubing Pressure   Casing Pressure   Choke Size		recovery of lot	al volume	of load oil and m	est be equal to or exceed top	allowable for th	is depth or be	for full 24 hou	es.)		
Actual Prod. During Test  Oil - Bbis.  Water - Bbis.  Gas- MCF  Ga	Date First New Oil Run To Tank	Date of Tes	ì		Producing Method (Flow,	, p <del>ump</del> , gas lift,	etc.)				
Actual Prod. During Test  Oil - Bbis.  Water - Bbis.  Gas- MCF  Ga							10 1 6				
GAS WELL  Activity Prod. Test - MCF/D  Langth of Test  Bible. Condensess/MMCF  Gravity of Condensess.  Conting Pressure (Shul-in)  Choke Size  VI. OPERATOR CERTIFICATE OF COMPLIANCE  I hereby certify that the rules and regulations of the Oil Conservation  Divinion have been complied with and that the information given above is true and complete to the best of my knowledge and belief.  Signature  Connie L. Malik. Regulatory Compliance Rep.  Pristed Name  Title  Title  Title  Title	Length of Test	Tubing Pres	ans		Casing Pressure		Choke Size	1			
GAS WELL  Activity Prod. Test - MCF/D  Langth of Test  Bible. Condensess/MMCF  Gravity of Condensess.  Conting Pressure (Shul-in)  Choke Size  VI. OPERATOR CERTIFICATE OF COMPLIANCE  I hereby certify that the rules and regulations of the Oil Conservation  Divinion have been complied with and that the information given above is true and complete to the best of my knowledge and belief.  Signature  Connie L. Malik. Regulatory Compliance Rep.  Pristed Name  Title  Title  Title  Title	Action Band Daving Test	ION Dit			Weter Phie	Water - Blde					
Actual Prof. Test - MCF/D  Langth of Test.    Tabling Presence (Shut-in)   Choice Size	Notice Figure 168	UM - BOUL			Water - DOOL						
Actual Prof. Test - MCF/D  Langth of Test.    Tabling Presence (Shut-in)   Choice Size							<u> </u>				
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 Connie L. Malik, Regulatory Compliance Rep. Printed Name Title  Casing Pressure (Shul-in)  Choke Size  OIL CONSERVATION DIVISION  FEB 0 5 '92  Date Approved  By ORIGINAL SIGNED BY JERRY SEXTON  DISTRICT I SUPERVISOR  Title  Title				· · · · · · · · · · · · · · · · · · ·	1841- 4			Condenses	···		
VL OPERATOR CERTIFICATE OF COMPLIANCE  I bereby 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  Connie L. Malik, Regulatory Compliance Rep.  Printed Name  Title  OIL CONSERVATION DIVISION  FEB 0 5 '92.  Date Approved  By ORIGINAL SIGNED BY JERRY SEXTON  DISTRICT I SUPERVISOR  Title	FIGE 16K - MCHD		•		Boss, Concential MUNICIPAL	•	CREVRY OF	CONGRESS.			
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 gives above is true and complete to the best of my knowledge and belief.  Signature Connie L. Malik, Regulatory Compliance Rep. Printed Name  Title  OIL CONSERVATION DIVISION FEB 0 5 '92.  Date Approved  By ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR Title  Title	Testing Method (pitet, back pr.)	No.	Shirt	-m)	Casing Pressure (Shut-in)	Choke Size	Choke Size				
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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 Connie L. Malik, Regulatory Compliance Rep. Printed Name Title  Title  OIL CONSERVATION DIVISION  FEB 0 5 '92.  Date Approved  By ORIGINAL SIGNED BY JERRY SEXTON  DISTRICT I SUPERVISOR  Title	VI OPERATOR CERTIEN	TATEOE	COM	TIANCE		<del></del>					
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.    Date Approved					OIL CO	NSERV	<b>ATION</b>	DIVISIO	NC		
Signature Connie L. Malik, Regulatory Compliance Rep. Printed Name Title  Date Approved  DISTRICT I SUPERVISOR  Title  Title	Division have been complied with an										
Signeture  Connie L. Malik, Regulatory Compliance Rep. Printed Name  Title  Title  Title  Title					Date Annro	ved _	1 60				
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Connie L. Malik, Regulatory Compliance Rep. Printed Name  Title  Title  Title					D. ORIGINA	AL SIGNED I	3Y JERRY S	SEXTON			
Printed Name  Title  Title	Signature Connic I Maldia Base										
1/22/02	Printed Name	TATOLY (	COMD 11								
Date Telephone No.   FOR RECORD CALLS APR 30 1993		915=688-6					-		20 1002		
				phone No.	FOR REC	OPD 4	<b>MLY</b>	<u>apr</u>	<u>3 U 1993</u>		

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 filled for each pool in multiply completed wells.