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**DISTRICT I**  
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**DISTRICT III**  
1000 Rio Brazos Rd., Aztec, NM 87410

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  
Instructions  
at Bottom of Page

**REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS**

|   |  |                   |
|---|--|-------------------|
| Operator<br>Meridian Oil Inc.   |  | Well API No.      |
| Address<br>21 Desta Drive Midland, Texas 79705  |  |                   |
| Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)                           |  |                   |
| New Well <input type="checkbox"/>   | Change in Transporter of:<br>Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> | Effective 2-1 -89 |
| Recompletion <input type="checkbox"/>   | Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>                |                   |
| Change in Operator <input checked="" type="checkbox"/>  |  |                   |
| If change of operator give name and address of previous operator Doyle Hartman P.O. Box 1861 Midland, Texas 79702 |  |                   |

**II. DESCRIPTION OF WELL AND LEASE**

|  |               |   |  |           |
|--|---------------|---|--|-----------|
| Lease Name<br>Cities-Thomas  | Well No.<br>5 | Pool Name, including Formation<br>Langlie-Mattix (7 Rivers) | Kind of Lease<br>State, Federal or Fee | Lease No. |
| Location<br>Unit Letter A : 990 Feet From The N Line and 990 Feet From The E Line<br>Section 19 Township 24-S Range 37-E, NMPM, Lea County |               |   |  |           |

**III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS**

SCURLOCK PERMIAN CORP EFF 9-1-91

|  |  |
|--|--|
| Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>         | Address (Give address to which approved copy of this form is to be sent)<br>P.O. Box 1183 Houston, Tx. 77001 |
| Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent)<br>P.O. Box 1384 Jal. N.M. 88252    |
| If well produces oil or liquids, give location of tanks.   | Unit Sec. Twp. Rge.<br>A 19 24S 37E  |
| Is gas actually connected?   | When ?<br>yes 4-9-84   |

**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 Monahan Operations Tech III  
Printed Name Title  
2-24-89 915/686-5681  
Date Telephone No.

**OIL CONSERVATION DIVISION**

Date Approved MAR 10 1989  
By Orig. Signed by  
Paul Kautz  
Geologist  
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.

**RECEIVED**

**MAR 1 1989**

**OCD  
HOBBS OFFICE**