Sultimit 5 Copies Appropriate District Office DISTRICT I P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerais and Natural Resources Department

Form C-104

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

OIL CONSERVATION DIVISION P.O. Box 2088

DISTRICT III

Santa Fe, New Mexico 87504-2088

1000 Kio Brazos Rd., Aziec, NM 87410	REQ	UESTE	OR AI	LOWA	BLE AND AUTHORIZA	TION	
I.		TOTR	ANSP		AND NATURAL GAS	ATION	
Operator			1101	<u> </u>	AND INATURAL GAS	Weil API No.	
Meridian Oil Inc.						WEII API NO.	
Address							
21 Desta Drive	Mi	dland,	Teva	c 70	705		
Reason(s) for Filing (Check proper box)			_ I CAG	3 / 9	Other (Please explain)		
New Well	Change in The second of						
Recompletion	Oil Dry Gas Effective 2-1 -89						
Change in Operator	Casinghe	ad Gas 🗌	Conden	_			
If change of operator give name and address of previous operator Do	yle Ha	rtman	P	.O. Bo	x 1861 Midland,	Texas 79702	
IL DESCRIPTION OF WELL	ANDIE	ACE			, , , , , , , , , , , , , , , , , , ,	77102	
Lease Name	AND LE	Well No.	D- 1 N				
Hodge		3			ng Formation	Kind of Lease	Lease No.
Location			Lang	lie Ma	ttix - 7 Rivers Qu	e e e e e e e e e e e e e e e e e e e	
Unit Letter B	6	60			M 1000		
Unit Letter	- : <u>°</u>	00	_ Feet Fro	on The	N Line and 1980	Feet From The	E Line
Section 8 Townshi	n 24	-S	Range	3	7-E NILIDRA		
			KAUKO		/-E , NMPM,	Lea	County
III. DESIGNATION OF TRAN	SPORTE	ROFO	IL ANI	NATT	PALTCAS TEMPODA	DILY ADAMONTO	7 1
Name of Authorized Transporter of Oil		or Conde	nesie ,	Address (Give address to which approved copy of this form is to be sent)			
			l			approved copy of this form t	s to be sent)
Name of Authorized Transporter of Casing	ghead Gas		or Dry (ies 🗍	Address (Give address to which	arrand some of this form	
						approved copy of this form t	s to be sent)
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When ?	
VI. OPERATOR CERTIFIC	ATE OF	COM	OF TARE	_			
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information gives about					OIL CONSERVATION DIVISION		
is true and complete to the best of my knowledge and belief.					MAD C	1989	
				Date Approved	MAR 6	1303	
_ ourie	// /g	nac	1/10	er I	<u> </u>		
Signature			1		ByOMGIN	IAL SIGNED BY JERDY	TOTAL TOTAL
Connie Monahan Printed Name	<u>Opera</u>	tions	Tech	III		BISTERN / SUPERVER	
2-24-89			Title		Title		
Date	712	/686-5			1110		
		7.000	phone No		i		

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
- 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.