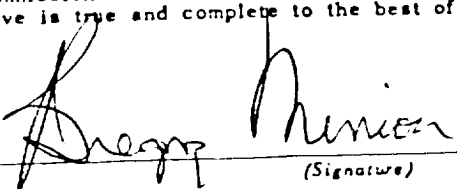
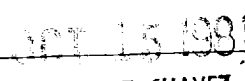


DISTRIBUTION		NEW MEXICO OIL CONSERVATION COMMISSION		Form C-104	
SANTA FE		REQUEST FOR ALLOWABLE		Supersedes Old C-104 and C-110	
FILE		AND		Effective 1-1-65	
U.S.G.S.		AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
LAND OFFICE					
TRANSPORTER		OIL			
		GAS			
OPERATOR					
PRORATION OFFICE					
Operator Merrion Oil and Gas Corporation					
Address P. O. Box 1017, Farmington, New Mexico 87401					
Reason(s) for filing (Check proper box)				Other (Please explain)	
New Well <input type="checkbox"/>		Change in Transporter of:		Change of Operator	
Recompletion <input type="checkbox"/>		Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>			
Change in Ownership <input type="checkbox"/>		Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>			
Operator If change of ownership, give name and address of previous owner J. Gregory Merrion & Robert L. Bayless, Box 507, Farmington, New Mexico 87401					
DESCRIPTION OF WELL AND LEASE					
Lease Name Bonanza		Well No. 1		Pool Name, including Formation Chacon Dakota Associated	
				Kind of Lease State, Federal or Fee Jicarilla	
				Lease No. 360	
Location Unit Letter D 990 Feet From The North Line and 990 Feet From The West					
Line of Section 2 Township 22N Range 3W, NMPM, Sandoval County					
DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS					
Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)			
Permian Corporation		P. O. Box 1183, Houston, Texas 77001			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)			
El Paso Natural Gas		P. O. Box 990, Farmington, New Mexico 87401			
If well produces oil or liquids, give location of tanks.		Unit D	Sec. 2	Twp. 22N	Range 3W
		Is gas actually connected?		When	
		Yes		March, 1969	
If this production is commingled with that from any other lease or pool, give commingling order number:					
COMPLETION DATA					
Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover
		Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded		Date Compl. Ready to Prod.		Total Depth	
				P.B.T.D.	
Elevations (DF, RKB, RT, GR, etc.)		Name of Producing Formation		Top Oil/Gas Pay	
				Tubing Depth	
Perforations				Depth Casing Shoe	
TUBING, CASING, AND CEMENTING RECORD					
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET	
				SACKS CEMENT	
TEST DATA AND REQUEST FOR ALLOWABLE OIL 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 Tanks		Date of Test		Producing Method (Flow, pump, gas lift, etc.)	
Length of Test		Tubing Pressure		Casing Pressure	
Actual Prod. During Test		Oil-Bbls.		Water-Bbls.	
				Choke Size	
				Gas-MCF	
GAS WELL					
Actual Prod. Test-MCF/D		Length of Test		Bbls. Condensate/MMCF	
Testing Method (pilot, back pr.)		Tubing Pressure (shut-in)		Casing Pressure (shut-in)	
				Choke Size	
I. CERTIFICATE OF COMPLIANCE					
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.					
					
J. GREGORY MERRION, President					
10-13-81					
(Date)					
OIL CONSERVATION COMMISSION					
APPROVED  19					
BY Original Signed by FRANK T. CHAVEZ					
SUPERVISOR DISTRICT # 3					
TITLE					
This form is to be filed in compliance with RULE 1104.					
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.					
All sections of this form must be filled out completely for allowable on new and recompleted wells.					
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.					
Separate Forms C-104 must be filed for each pool in multiply completed wells.					