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

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

| | TO | TRANS | SPORT OIL | AND NAT | URAL GA | S Well A | DI No | | | |
|--|--|----------------------|------------------------|---------------------------|-----------------------------------|----------------|-------------------------------------|--|------------------|--|
| perator | | | | | | Well A | : 1 170. | | ļ | |
| MERRION DIL & GAS (address | CORPORATI | ON | | | | | | | | |
| P.O. Box 840, Farm | ington, N | ew Mex | ico | TVI OV | r (Please expla | in) | | | | |
| eason(s) for Filing (Check proper box) | | | | | s (Please expla g Gallup | | dave vie | casino | leaks. | |
| lew Well | | | insporter of: | restin | à earinb | 101. 70 | uays VI | casing | only | |
| Recompletion | Oil | Dr | y Gas 🗀 ondensate 🔲 | | | | | | , | |
| Change in Operator | Casinghead G | as L Co | ondensate [_] | | | | | | | |
| change of operator give name nd address of previous operator | | | | | | | | | | |
| I. DESCRIPTION OF WELL | AND LEAS | E | Dina. | أراث م | tred | <u>:</u> | | | | |
| I. DESCRIPTION OF WISEL Lease Name | W | ell No. Po | ol Name, Includir | | | Kind o | | _ | ase No. | |
| Media Entrada Unit | | | Undesigna | | <u>ab</u> _ | Xitele,x | Federal MXF8 | NM 12 | <u>012</u> | |
| Location | | | | | 1 | | , | LL | | |
| Unit Letter | . 330 | Fo | ect From The W | estLin | e and $1,98$ | <u>()</u> Fo | et From The | outh | Line | |
| Unit Letter | | | | | 6 | | | | County | |
| Section 14 Townshi | p 19N | R | ange 3W | , N | мрм, San | doval | | | County | |
| | | OF CIT | ARIEN REACTIVE | DAI CAC | | | | | | |
| III. DESIGNATION OF TRAN | Δ1 | OF OIL | AND NATU | Address (Giv | e address to wi | hich approved | copy of this fo | rm is to be se | nt) | |
| Name of Authorized Transporter of Oil | | Condensar | | | 3ox 1429, | | | | | |
| Conoco, Inc. | ahead Gas | | r Dry Gas | Address (Gir | e address to w | hich approved | copy of this fo | orm is to be se | nt) | |
| Name of Authorized Transporter of Casin | Picen Geo | 0 | ـــا ، | , | | | and the second | | | |
| If well produces oil or liquids, Unit Sec. Twp. Rge. | | | | | Is gas actually connected? When ? | | | | | |
| give location of tanks. | | L 14 19N 3W | | | | | | | | |
| If this production is commingled with that | from any other | lease or po | ol, give comming | ing order num | iber: | | | | | |
| IV. COMPLETION DATA | - | <u>-</u> | | | | | | 10 | Nice the line | |
| | | Oil Well | Gas Well | New Well | Workover | Deepen | | Same Res'v | Diff Res'v | |
| Designate Type of Completion | | X | <u> </u> | | X | L | $\int_{\mathbb{R}^{N}} \frac{X}{x}$ | J | _1 | |
| Date Spudded Date Compl. Ready to Prod. | | | | I otal Depth | Total Depth | | | P.B.T.D. 5300' | | |
| | | | | 5340 ' Top Oil/Gas Pay | | | | | | |
| Elevations (DF, RKB, RT, GR, etc.) | , GR, etc.) Name of Producing Formation | | | | 2790' (Top of Glp.) | | | Tubing Depth 2400' | | |
| 6795' KB. Gallup | | | | J | | | | Depth Casing Shoe | | |
| Perforations Entrada perfs: | 5206'-54 | ⊦'`(Bel | ow Ret. B | ridge Pl | nd) · í | | | _ | • | |
| Casing Leaks: 556'-59 | יחו 1000 יחו | 1327 | t 2562!=5 | //5' LPT | oauc mu z | RD | | | | |
| | TUBING, CASING AIVE | | | CEIVICINI | CEMENTING RECORD DEPTH SET | | | SACKS CEMENT | | |
| HOLE SIZE | | CASING & TUBING SIZE | | | 217' | | | 140 | | |
| _15" | 10 3/4" Casing | | | | | | 300 | | | |
| 8 3/4" | 3/4" 7" Casing | | | 5340' 2400' | | | | | | |
| | 3 ½" Tubing | | | | 2400 | | | | | |
| V. TEST DATA AND REQU | EST FOR A | LLOWA | BLE | | | | | | | |
| | r recovery of tot | al volume i | of load oil and mu | si be equal io | or exceed sop a | llowable for 1 | his depth or be | for full 24 ho | ours.) | |
| OIL WELL (Test must be after Date First New Oil Run To Tank | Date of Test | | , | Producing | Method (Flow, | pump, gas líft | | | | |
| | | | 1989 | ODI K. | 75 Submer | sible p | | EGE | | |
| August 31, 1989 Length of Test | August 31, 1989 August 31, 1989 Length of Test | | | | ssure | | Cha Siz | 3 | | |
| | | | | | | | Gas- MCI | ne (iii | } 400 | |
| 24 hrs. Actual Prod. During Test | 24 HFS. citual Prod. During Test Oil - Bbls. | | | Water - Bt | | | Gas- MCI | 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1 | | |
| | 143 | | | 5000 | 5000 (est.) | | | | | |
| CACAUCIE | | · | | | | | • | V non | 1 | |
| GAS WELL | Length of T | l'est | | Bbls. Con | densate/MMCF | | Gravity of | Condensate | | |
| Actual Prod. Test - MCF/D | Lengui of | | | | | | | | ~ _ | |
| Tubing Mathed (pitet back pr.) Tubing Pressure (Shut-in) | | | | Casing Pressure (Shut-in) | | | Choke Si | e | | |
| Testing Method (pitot, back pr.) | | - , | - | | | | | | | |
| TO CONTINUE OF THE PARTY OF THE | | COME | LIANCE | | | | | | | |
| VI. OPERATOR CERTIF | ICATE OF | Oil Corse | LIMITOD | | OIL CC |)NSER | OITAV | DIVIS | ION | |
| 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 t | ny knowledge a | nd belief. | | ll D₂ | ate Appro | ved | 10- | 2-89 | | |
| | | | | | | | | | | |
| T. Greenerrion | | | | | , Origin | rel Signed b | y Frank T. | CHVAES | | |
| | | | | | | | | | | |
| 1. Grey Mellion, Troduceron engineer | | | | | | ULTRAISO | R DISTRICT | • | | |
| Printed Name | | (505) | Title 327-9801 | Ti | tle | | | | | |
| 9/28/89 | | | 327-9801 ephone No. | · | | | | | | |
| Date | | 101 | epitone two. | - 11 | | | | | | |

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.