Submit 5 Copies
Appropriate District Office
DISTRICT 1
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., Aziec, NM 87410

DISTRICE II P.O. Drawer DD, Anesia, NM 88210

REQUEST FOR ALLOWABLE AND AUTHORIZATION

| | | TO TRA | NSPO | ORT OIL | AND NA | TURAL GA | | | | | |
|--|-------------------------------|---|----------------|------------|-----------------|---------------------------|---------------------------------------|----------------------------------|---|--|--|
| Openior MERRION OIL & GAS CO | −− «△▼™«ط∩dd | J | | | | | Well | API No. | | | |
| MERRION OIL & GAS CO | KPURATIU! | <u> </u> | | | | | | | | | |
| P. O. Box 840, Farmi | ngton, Ne | ew Mexi | CO | | | | | | | | |
| Reason(s) for Filing (Check proper box | :) | | | | Oth | er (Please expla | zin) | | | | |
| New Well | | Change in | | 11 | | | | | | | |
| Recompletion | Oil | id Gas [] | Dry Gas | | | | | | | | |
| Change in Operator | Casinghea | id Cas [_] | Conden | site [_] | | | | | | | |
| and address of previous operator | | | | | | | · · · · · · · · · · · · · · · · · · · | | | | |
| II. DESCRIPTION OF WEL | L AND LE | ASE | | | | | | | | | |
| ease Name Well No. Pool Name, Includi | | | | | - a- | | | nd of Lease Lease No. | | | |
| Canyon Largo Unit | | 307 | De | evils F | ork Gall | up | AQU. | Legelal OCX M2 | SF 07 | 8877 | |
| Location | 1 | 0.5.0 | | | Couth | 70 | 0 - | | Fact | | |
| Unit LetterI | : <u>-</u> | 850 | Feet Fro | om The | South Lin | e and 19 | <u> </u> | set From The | Last | Line | |
| Section 11 Town | ship 24N | | Range | 6W | , 14 | MPM, R | io Arri | ba | | County | |
| III. DESIGNATION OF TRA | ANSPORTE | ER OF O | IL ANI | D NATU | | | | | | ************************************** | |
| Name of Authorized Transporter of Oi | X | or Conden | sate | | 1 | | | copy of this fo | | | |
| Meridian Oil, Inc. | | | | | | | | | ton, N.M. 87499 | | |
| Name of Authorized Transporter of Casinghead Gas [X] or Diy Gas [El Paso Natural Gas Co. | | | | | i | | | | copy of this form is to be sent) Iton, N.M. 87499 | | |
| well produces oil or liquids, Unit Sec. Twp. | | | | | | y connected? | When | | | | |
| give location of tanks. | K | 11 | 24N | | Yes | , | | 7/85 | | | |
| I this production is commingled with the | at from any od | her lease or | pxol, giv | e commingl | ing order num | oer: | | | | | |
| IV. COMPLETION DATA | | | | | | 1 | 1-5 | | | Vice by 1 | |
| Designate Type of Completion | on - (X) | Oil Weil | (| Jas Well | New Well | Workover | Deepen | Plug Back | Same Regy | Діп Керу Т | |
| Date Spudded | | l. pl. Ready to | Prod. | | Total Depth | I | I | 11 P.B.T.D. | | | |
| , | | | | | | | | | | | |
| Pevauons (DF, RKB, RT, GR, etc.) Name of Producing Formation | | | | | Top Oil/Cas Pay | | | Tubing Depth | | | |
| Perforations | | | | | 1 | | | Depth Casing | Shoe | | |
| | | | C + C | 10 110 | CYCLAGA | NO DECOD | 12 | <u> </u> | | · · · · · · · · · · · · · · · · · · · | |
| 11015.015 | | TUBING, CASING AND CASING & TUBING SIZE | | | | DEPTH SET | | | SACKS CEMENT | | |
| HOLE SIZE | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | l | | | J | | | |
| V. TEST DATA AND REQU | EST FOR A | ALLOW/ | ABLE | | he sound to be | arcad too all | overbla for thi | e doubt as he fo | or full 24 hour | e 1 | |
| OIL WELL (Test must be after recovery of total volume of load oil and must Date First New Oil Run To Tank Date of Test | | | | | | thod (Flow, pu | | | 7 1111 24 71010 | <u>-,,</u> | |
| Date This New On Roll To Talk | Date of 1 | Date of Test | | | | ,, ,, | | | | | |
| Length of Test | Tubing Pr | Tubing Pressure | | | | ırc | | Christize | - | 100 m - | |
| | | | | | | | | | bE! | WEH | |
| Actual Prod. During Test | Prod. During Test Oil - Bbls. | | | | Water - Bbls | | | and. | | [4 | |
| CACAMELI | | | | | · | | | | EB2719 | | |
| ACTUAL Prod. Test - MCF/D | [Langth of | Test | | | Bbls. Conder | sate/MMCF | | GANONE | @(B)A1 | DIV | |
| Metad From Test - Michie | | ixingm or rest | | | | Dom Condensadiration | | | Choke Size DIST. 3 | | |
| lesting Method (pitot, back pr.) | Tubing Pr | Tubing Pressure (Shut-in) | | | | Casing Pressure (Shut-in) | | | <u>∪131.</u> 3 | | |
| | | | | | | | | | | | |
| VI. OPERATOR CERTIF | | | | ICE | | | ISEDV | ATION [| 71//1610 | N | |
| I hereby certify that the rules and re | gulations of the | Oil Conser | vation | | | | 40L17V | W LIOIA F | | 1 Y | |
| Division have been complied with a | nd that the info | envition give and belief | en above | | | • | -1 | | | | |
| is true and complete to the best of my knowledge and belief. | | | | | Date | Approve | O | FEB 27 1090 | | | |
| Alm X lum | | | | | | By Zone Conf | | | | | |
| Signature Commence Commence | n Oncorr | iona M | 0 to 0 ft f | | By | | - Barre | \star \rightarrow \bigcirc | tong - | | |
| Steven S. Dun | n, operat | TOUR W | anage Title | <u> </u> | Title | | SUPER | VISION D | ISTRICT | # 3 | |
| 2/24/89 | 50 | 05-327- | | , | | | | | | | |
| Date | | Tele | phone N | io. | 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 pxol in multiply completed wells.