

NEW MEXICO OIL CONSERVATION COMMISSION
 REQUEST FOR ALLOWABLE
 AND
 AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
 Supersedes Old C-104 and
 Effective 1-1-83

SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

RECEIVED
 MAY 12 1983
 OIL CON. DIV.
 DIST. 3

Operator
 Merrion Oil & Gas Corporation

Address
 P. O. Box 1017, Farmington, New Mexico 87499

Reason(s) for filing (Check proper box)

New Well	<input type="checkbox"/>	Change in Transporter of:	
Recompletion	<input checked="" type="checkbox"/>	Oil	<input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

Other (Please explain)

If change of ownership give name and address of previous owner

I. DESCRIPTION OF WELL AND LEASE

Lessee Name Salazar Federal G 34	Well No. 4	Pool Name, including Formation Devils Fork Gallup	Kind of Lease State, Federal or Fee Federal SF	Lease No. 080136
Location				
Unit Letter H	: 1650	Feet From The North	Line and 1090	Feet From The East
Line of Section 34	Township 25N	Range 6W	, NMPM, Rio Arriba	

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Permian Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1702, Farmington, New Mexico 87499
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> Negotiating	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks. Unit: H, Sec: 34, Twp: 25N, Rge: 6W	Is gas actually connected? When NO

If this production is commingled with that from any other lease or pool, give commingling order number:

III. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well	Workover <input checked="" type="checkbox"/>	Deepen	Plug Back <input checked="" type="checkbox"/>	Same Res'v.	Diff. Res'v. <input checked="" type="checkbox"/>
Date Spudded 9/29/58	Date Compl. Ready to Prod. 10/23/58 4-17-83	Total Depth 6726	P.B.T.D. 6045' KB					
Elevations (DF, RKB, RT, CR, etc.) 6365' GL, 6375' KB	Name of Producing Formation Gallup	Top Oil/Gas Pay 5536' KB	Tubing Depth 5532' KB					
Perforations 5536 - 5853' KB, 17 holes. .34"			Depth Casing Shoe 6726					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12-1/4"	8-5/8"	350'	400 SX					
7-7/8"	5-1/2"	6726'	569 SX					
	2-3/8"	5532' KB						

IV. 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 24 hours able for this depth or be for full 24 hours)


Date First New Oil Run To Tanks 5/11/83	Date of Test 5/11/83	Producing Method (Flow, pump, gas lift, etc.) Flowing
Length of Test 24 hour	Tubing Pressure 100 PSI	Casing Pressure 500 PSI
Actual Prod. During Test	Oil - Bbls. 18	Water - Bbls. -0-
		Gas - MCF 39

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

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.


 Steve S. Dunn, Operations Manager
 5/11/83
 (Date)

OIL CONSERVATION COMMISSION

APPROVED MAY 12 1983
 BY Original Signed by FRANK T. CHAVEZ
 TITLE SUPERVISOR DISTRICT # 3

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 deviated tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for all wells on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner name or number, or transporter, or other such change of conditions.