	SANTA FE FILE	REQUES	T FOR ALLOWABLE AND	Form C-104 Supersedes Old C-104 and C Elfoctive 1 ₇ 1-63			
	U.S.G.S. LAND OFFICE TRANSPORTER GAS ORERATOR	AUTHORIZATION TO TR	RANSPORT OIL AND NATURA	AL GAS			
!_	PRORATION OFFICE		:				
	Merrion Oil & Gas Co	rporation					
	P. O. Box 1017, Farmington, New Mexico 87499						
	Reason(s) for filing (Check proper bo		Other (Please explain)	- ON. DIV.			
	New Well	Change in Transporter of:		3.44. 3			
	Recompletion Change in Ownership	Oil Dry C Casinghead Gas Condo	lst delivery	of gas 6/27/83.			
	If change of ownership give name and address of previous owner						
I.	DESCRIPTION OF WELL AND	LEASE Well No. Pool Name, Including I	Far-elles Luci La				
	Salazar G Com 26	l Devils Fork		deral or Fee Federal SF 080136			
	Unit Letter M M : 825	Feel From The South Li	ne and 810 Feet 7:	rom The West			
l	Line of Section 26 To	waship 25N Range	6W , NMPM, Ri	o Arriba County			
Ι		TER OF OIL AND NATURAL GA					
	Nome of Authorized Transporter of Officer Permian Corporation	·· —	ł –	oproved copy of this form is to be sent)			
ł	Name of Authorized Transporter of Ca	singhead Gas 💢 or Dry Gas 🗔		ngton, New Mexico 87499 oproved copy of this form is to be sent)			
	El Paso Natural Gas	Company Unit Sec. Twp. Pge.	P. O. Box 990, Farming	gton, New Mexico 87499			
	If well produces oil or liquids, give location of tanks.	L 26 25N 6W	Yes	When -6/24783 7-27			
	If this production is commingled wi COMPLETION DATA	th that from any other lease or pool,	give commingling order number:				
	Designate Type of Completic	on - (X) Gas Well Gas Well	New Well Workover Deepen	Plug Back Same Resty, Diff. Rest			
-	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.			
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Otl/Gas Pay	Tubing Depth			
-	Ferforations	<u> </u>	<u> </u>	Depth Casing Shoe			
-	TUBING, CASING, AND C		O CENENTING DECORD				
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			
-	,						
-							
(TEST DATA AND REQUEST FO	able for this de	pth or be for full 24 hours)	oil and must be equal to or exceed top allo			
1	Date First New Cil Run To Tanks	Date of Test	Producing Method (Flow, pump, ga	z lift, etc.)			
1	Length of Test	Tubing Pressure	Cosing Pressure	Choxe Size			
7	Actual Prod. During Test	Oil-Bbls.	Water-Bbla.	Goa-MCF			
!_		L	<u> </u>				
	Actual Prod. Tool-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate			
				GICTRY OF CONSUMERS			
	Teeting Method (pitol, back pr.)	Tubing Pressure (Shut-in)	Cosing Pressure (Shut-in)	Choke Size			
С	ERTIFICATE OF COMPLIANC	Œ	OIL CONSER	vation commission JN 29 1983			
1	hereby certify that the rules and re	rgulations of the Oil Conservation	APPROVED				
Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		Driginal 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 deepen well, this form must be accompanied by a tabulation of the deviation.					
(Signolwe) Steve S. Dunn, Operations Manager							
				tesis taken on the well in ac	tests taken on the well in accordance with RULE: 1112 int. All sections of this form must be filled out completely for allo		
					<i>(Tid</i> 6/27/	·	able on new and recompleted
			(Date)			Fill out only Sections I. II. III, and VI for changes of owne well name or number, or transporter, or other such change of condition	
			I I I WAS FACULA CITAL A	and he tited for each noot in multip			