1-Acctg Dept
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

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

OIL CONSERVATION DIVISION P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS I.

Operator								Well API No.				
Merrion Oil & Gas Corporation							30-045-26204					
Address												
P. O. Box 840,		ton, No	ew Mexi	lco 8	37499		/bt 1 :	,				
Reason(s) for Filing (Check p New Well	roper box)		Change in	T	an afi		es (Please explai	N)				
Recompletion		Oil	Citange in	Dry Gas			Effectiv	e 1-1-	92			
Change in Operator		Casinghea	d Gas 🗍	Condens								
If change of operator give nam	ne Bran			s. Inc	224	40Λ Fore	st Park B	lvd, F	t. Worth	TX 76	110	
and address of previous opera				-,	,							
II. DESCRIPTION O Lease Name	Well No. Pool Name, Includi				ing Formation Kind of			of Lease	(Lease Lease No.			
Federal 20			1E		in Dako	_			Federal or XX		78530	
Location												
Unit Letter	3	. 183	30	Feet Fro	m The N	orth Lin	e and 1840) [eet From The	East	Line	
			_			_						
Section 20	Township	251	4	Range	9W	, NI	MPM,	San J	uan		County	
III. DESIGNATION	OF TRANS	SPORTE	R OF O	IL AND	NATU	RAL GAS						
Name of Authorized Transpo	rter of Oil		or Conder		X	Address (Giv	e address to whi					
Giant Refining Company							P. O. Box 846, Farmington, New Mexico 87499					
Name of Authorized Transpo				or Dry C	3as [X		e address to whi					
El Paso Natura	 			D				Ington, New Mexico 87499				
give location of tanks.	Unit			is gas actually connected? Yes			When? June 26, 1985					
If this production is comming	led with that f	ļ		L			ber:		<u> </u>			
IV. COMPLETION I		<u>-</u>				_						
Designate Type of C	onv.letion	(Y)	Oil Well	G	as Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Spudded	ompicuon .		pi. Ready to			Total Depth	ll	· -	<u> </u>	J	_l	
trate spanded		Date Com	pi. Kesuy u	o riou,		Total Depui			P.B.T.D.			
Elevations (DF, RKB, RT, G	Name of Producing Formation				Top Oil/Gas Pay			Tubing Den	Tubing Depth			
		•				<u> </u>						
Perforations									Depth Casin	g Shoe		
							····		<u> </u>			
HOLE SIZE	TUBING, CASING AND				 			·- 				
NOLE SIZE		CASING & TUBING SIZE				DEPTH SET			_	SACKS CEMENT		
						 -						
			_							·····		
V HERAN IN LANCE THE												
V. TEST DATA AND OIL WELL General	REQUES	T FOR A	ALLOW	ABLE	,							
Date First New Oil Run To	iusi be after re	covery of to	otal volume	of load o	il and must	be equal to or	exceed top allow	vable for th	is depth or be	Cor full 24 hou	vs.)	
The state of the s	Date of Test				Producing Method (Flow, pump, gas lift, etc.)					, <u> </u>		
Length of Test	Tubing Pressure				Casing Pressure			7/5				
* "-	Training Florance				Casing Pressure			Charles 122 1 1002				
Actual Prod. During Test	Oil - Bbls.	**	 .	·	Water - Bbis.			Gas- MCF				
									C	. COI.	، بيه	
GAS WELL									J	DIST.	3	
Actual Prod. Test - MCI/D	Length of Test				Bbls. Condensate/MMCF			Hisvill AL	Gravity of Condensate			
lesting Method (pitot, back pr	Tubing Pressure (Shut-in)							Clavity of Condensate				
b seems (prior, black pr	7	r nord 1,16	seure (Shut-	in)		Casing Pressu	re (Shut-in)		Choke Size			
VI. OPERATOR CO	DTIETO	TRA	00: ::				-					
VI. OPERATOR CE I hereby certify that the rul Division have been according					CE	_	\II			······································		
THE COLUMN	OCH WILL SOAT IN	a the left.		alion			OIL CONS	SERV	I NOITA	DIVISIO	N	
is true and complete to the	best of my ks	owledge an	nd belief.	# #DOAG		İ						
Chal.) 4	1	,			Date	Approved		JAN 2	1 1882		
Signature	7. 47h	e/a	1	<u></u>			, <u> </u>	17				
Signature Esther J. Grey	eyes	U_{op}	eratio	ns Te	ch	By_	عرك	when.	Vana			
Printed Name				Title			CHEEN	HOOD D	ICTUINT !	3		
1/17/92 Date		(50	05) 327	7-9801		Title.	59776.0	VIOUN D	!STRICT #	3		
			Tele	phone No.	•							
INSTRUCTIONS:	This for-	in to t	Cl. ·									

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 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