## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

	(1710	T	
DISTRIBUTE	ON .		
SANTA FE			
FILE		[	
U.\$.0.\$.		T	
LAND OFFICE			!
TRANSPORTER	OIL		
	G A8		
OPERATOR			
PRORATION OFFICE			

OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO \$7501

301612 Form C-104 Revised 10-01-78 JAN2 8 1986

Separate Forms G-104 must be filled for each pool in multiply completed wells.

OPERATOR		KEU		R ALLUWABLE	OIL CON.	DIV.
PROBATION OFFICE	AUTUOT	N74710N TO		ND	DICT O	
T.	AUTHOR	CIZATION IL	) IKANS	PORT OIL AND NAT	JRAL GAS DIOT. 3	
Operator		<del></del>	<del> </del>	<del></del>		
Merricn Oil & Gas Corp	ooration					
Address						
P. O. Box 840, Farming	aton, New	Mexico	87499			
Reason(s) for filing (Check proper box,				Other (Plea	se explain)	
X New Well		n Transporter o	of:			
Recompletion	orr			ry Gas		
Change in Ownership	Casi	nghead Gas	c	ondensate	·	
If change of ownership give name and address of previous owner						
II. DESCRIPTION OF WELL AN	D LEASE	Pool Name, I	ncluding F	ormation	Kind of Lease	
Lease Name		_			State Federal or Fee	Lease No.
Yucca Com		Dufers P	oint G	allup Dakota	State	LG 3496
Line of Section 2 Tow	mahip 25	5N 1	Range	9W . NMP	M, San Juan	County
III. DESIGNATION OF TRANSI	ORTER OF	OIT AND N	ATURA	r GAS		
Name of Authorized Transporter of Cil	⊗ or C	ondensate		Address (Give address	to which approved copy of this fo	rm is to be sent)
The Mancos Corporation				P. O. Box 132	0, Farmington, New Me	xico 87499
Name of Authorized Transporter of Cas	inghead Gas	ct Dry Go	as 🗍	Address (Give address	towhich approved copy of this jo	rm is to be sent)
If well produces oil or liquids,	Unit Sec	:	Rge.	Is gas actually connec	ted? When	
give location of tanks.	H		<u>9W</u>	! No		
If this production is commingled wit	h that from 🖣	ny other leas	e or pool,	give commingling ord	er aumber:	· · · · · · · · · · · · · · · · · · ·
NOTE: Complete Parts IV and	on reverse	side if necess	ary.			
VI. CERTIFICATE OF COMPLIA				OIL (	ONSERVATION DIVISION IN IN INC.	2:8 <b>1986</b>
I hereby certify that the rules and regulation	ons of the Oil ¢	onservation Div	ision have	APPROVED		~ 0 19 <del></del>
been complied with and that the information	on given is true	nd complete to	the best of		Original Ci 11 mass	
my knowledge and belief.				BY	Original Signed by FRA	NK T. CHAVEZ
1	7			TITLE	SUPERVISOR	DISTRICT # 3
1 / /	1			This form is	o be filed in compliance with	22
Signa	•			well, this form mu	quest for allowable for a newly at the accompanied by a tabulat well in accordance with AUL	tion of the deviatio.
Steve S. Dunn, Operat		ier		All sections of able on new and r	fittis form must be filled out completed wells.	ompletely for allow
1/27/86	•)				Sections I, II, III, and VI for sections I, III, and VI for sections are sections of the section of the section of the sections of the sections of the sections of the section	

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Plug Back

Some Res'v. Diff. Res'v.

20018	1 XX i	1 XX	<del></del>
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
12/14/85	1/15/86	6792' KB	6751' KB
Jevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oll/Gas Pay	Tubing Depth
6494' KB, 6481' GL	Gallup/Dakota	4606' KB	6298' KB
	<del>-84, 6396-98, 6465-72, 655</del>	9-62, 6569-72, 1PF.	Depth Casing Shoe
	560, 5564, 5568, 5594, <mark>5</mark> 61		)
	TUBING, CASING, AND	CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	8-5/8". 24 #/ft J=55	223' KB	170 sx (200 6 cu ft )
7-7/8"	4-1/2", 10.5 #/ft, K-55	6792' KB	1365 sx (2307 9 cu ft
, .			
	2-3/8"	1 6298' KB	all and must be equal to or exceed top allo
OIL WELL	TEOD ALLOWARIE Test must be o		
OIL WELL Date First New Oil Run To Tanks	FOR ALLOWABLE (Test must be a abie for this de	fier recovery of total volume of load pth or be for full 24 hours) Producing Method (Flow, pump, ga	
OIL WELL Date First New Oil Hun To Tanks 1/18/86	FOR ALLOWABLE (Test must be a abic for this de	fter recovery of total volume of load opth or be for full 24 hours)	
OIL WELL Date First New Oil Run To Tanks 1/18/86 Length of Test	TFOR ALLOWABLE (Test must be a abic for this de Date of Test  1/25/86 Tubing Pressure	fter recovery of total volume of load opth or be for full 24 hours)  Producing Method (Flow, pump, ga  Flowing Casing Pressure	Choke Size
OIL WELL Date First New Oil Run To Tanks  1/18/86  Length of Test  24 hour	FOR ALLOWABLE (Test must be a abic for this de	fter recovery of social volume of load pith or be for full 26 hours)  Producing Method (Flow, pump, ga	s lift, etc.)
OIL WELL Date First New Oil Run To Tanks  1/18/86 Length of Test	TFOR ALLOWABLE (Test must be a abic for this de Date of Test  1/25/86 Tubing Prossure  700	fter recovery of total volume of load pth or be for full 24 hours)  Producing Method (Flow, pump, ga  Flowing Casing Pressure	Chore Size
OIL WELL Date First New Oil Run To Tanks  1/18/86 Longth of Test  24 hour Actual Prod. During Test	TFOR ALLOWABLE (Test must be a abic for this de Date of Test  1/25/86. Tubing Pressure  700 Oil-Bbis.	fier recovery of sotal volume of load pith or be for full 24 hours)  Producing Method (Flow, pump, ga Flowing Casing Process  1000 Water-Bbis.	Choke Size  3/1  Gas-MCF
OIL WELL Date First New Oil Run To Tanks 1/18/86 Longth of Tost 24 hour	TFOR ALLOWABLE (Test must be a abic for this de Date of Test  1/25/86. Tubing Pressure  700 Oil-Bbis.	fier recovery of sotal volume of load pith or be for full 24 hours)  Producing Method (Flow, pump, ga Flowing Casing Process  1000 Water-Bbis.	Chore Size

New Well

Gas Well

Oll Well

XX

Workover

Deepen

IV. COMPLETION DATA

Designate Type of Completion - (X)

Perfs: 5688, 5692, 5712, 5727, 5738, 5784, 5786, 5800, 5807, 5838, 5842, 5856, 5860, 5866, 25 shots.
4606, 4613, 4616, 4625, 4628, 4630, 4638, 4640, 4658, 4665, 4686, 4703, 5187, 5204, 5220, 5224, 5230, 5236, 5240, 5245, 5253, 5266, 5272, 5314, 5319, 25 holes.