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LAND OFFICE		
TRANSPORTER	OIL	
	GAS	1
OPERATOR		
PRORATION OFFICE		

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

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

Operator J. Gregory Merrion and Robert L. Bayless	
Address P.O. Box 507, Farmington, New Mexico 87401	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input checked="" type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name  
and address of previous owner

Lease Name Chaco		Well No. 1	Pool Name, including Formation NIIP Picture Cliff	Kind of Lease State, Federal or Fee	State	Lease No. NM22046
Location						
Unit Letter	F	1846	Feet From The	North	Line and	1806
						Feet From The
						West
Line of Section	18	Township	26N	Range	12W	, NMPM, San Juan
						County

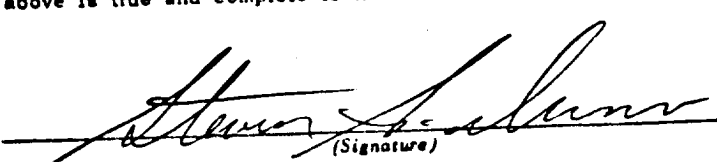
Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)	
El Paso Natural Gas Co.		P.O. Box 990, Farmington, NM 87401	
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.
			Rge.
		Is gas actually connected? When	
		no	

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

IV. COMPLETION DATA									
Designate Type of Completion - (X)									
	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.	
		X	X						
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.				
February 17, 1977	March 29, 1977		1350'		1187				
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth				
5989 G.R.	Picture Cliff		1113'		NA				
Perforations					Depth Casing Shoe				
1113-39'					1340'				
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
7-7/8"		5-1/2", 15.5#/ft.		39'		8 sacks			
4 3/4"		2-7/8", 6.5#/ft.		1340'		100 sacks			

V. 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 allowable for this depth or be for full 24 hours)			
Date First New Oil Run To Tanks		Date of Test		Producing Method (Flow, pump, gas lift, etc.)			
Length of Test		Tubing Pressure		Casing Pressure		Choke Size	
Actual Prod. During Test		Oil-Bbls.		Water-Bbls.		Gas-MCF	

GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
344 MCF/D	50 hrs.	--	--
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size
Back Pressure		231 PSIG	3/4"

VI. 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.	
	
Engineer	(Title)
May 13, 1977	(Date)

OIL CONSERVATION COMMISSION	
APPROVED _____, 19____	
BY Original Signed by A. R. Kendrick	
TITLE SUPERVISOR	
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 deviation tests taken on the well in accordance with RULE 111.	
All sections of this form must be filled out completely for allowable on new and recompleted wells.	
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.	