DISTRIBUTIO	N		
SANTA FE			
FILE			
U.S.G.S.		<u> </u>	
LAND OFFICE		<u> </u>	
IRANSPORTER	OIL	<u> </u>	
	GAS	1	<u> </u>
OPERATOR			<u> </u>
		4	1

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND

I

Ferm C-104		
Supersedes Old C-104	and	C-110
Efective 1-1-65		

U.S.G.S.	AUTHORIZATION TO TRAN	SPORT OIL AND NATURAL GA	S
IRANSPORTER OIL			
OPERATOR GAS			
PRORATION OFFICE			
Operator MERRION OIL & GA	S CORPORATION		
Address D. O. Boy 1017	Farmington, New Mexi	.co 87401	
Recson(s) for filing (Check proper box)	. dimini	Other (Please explain)	
New Well	Change in Transporter of: Oil Dry Gas	Change of Oper	ator
Recompletion	Casinghead Gas Condens		
Change in Ownership Operator			Farmington NM
Operator If change of ownership give name and address of previous owner	Gregory Merrion & F	Robert L. Bayless, Bo	X 307, Tarming company
DESCRIPTION OF WELL AND LE	EASE	emailon Kind of Lease	Lease No.
Lease Name	Well No. Pool Name, Including For	d/Pic. Cliffs State, Federal	1
Chaco	1 WAW Fruitland	1/PIC. CILLIB	
Unit Letter F : 1846	Feet From The North Line	and 1806 Feet From Th	west
Line of Section 18 Town	ship 26N Range	12W , NMPM, San J	uan County
DESIGNATION OF TRANSPORTE	ER OF OIL AND NATURAL GAS	S	
Name of Authorized Transporter of Oil	or Condensate	•	
Name of Authorized Transporter of Castr	nghead Gas or Dry Gas 🔀	Address (Give address to which approve	ed copy of this form is to be sent)
Western Gas Interst	ate	Ist International Bid Is gas actually connected? When	dg. Suite 1800, Dallas Texas 7527
If well produces oil or liquids,)	Yes Ju	ne, 1977
If this production is commingled with	that from any other lease or pool,	give commingling order number:	
. COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.
Designate Type of Completion	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Date Spudded	Date Compi. Reday to Fibe.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Perforations			Depth Casing Shoe
	TURING CASING, AND	CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
			and must be equal to or exceed top allow-
. TEST DATA AND REQUEST FO	RALLOWABLE (Test must be a able for this de	epth or be for jull 24 hours,	and must be equal to or exceed top allow-
OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas li	fi, etc.)
	Tubing Pressure	Casing Pressure	HEVERN
Length of Test	Inping Pleasure	KLU	GGLACE
Actual Prod. During Test	Oil-Bbla.	Water - Bbls.	2 1 1981
		T OIL C	ON. COM.
GAS WELL			IST. 3
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Choke Size
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Cosing Pressure (Shut-in)	Chore 3114
I. CERTIFICATE OF COMPLIANCE	CE	OIL CONSERV	ATION COMMISSION
I hereby certify that the rules and	regulations of the Oil Conservation	Original Signed by FRANK T	CHAVEZ
I hereby certify that the rules and to Commission have been complied to above in true and complete to the	vith and that the information given best of my knowledge and belief.	BY O'Burn 10	
		TITLE SUPERVISOR DISTRICT SE	
$V \qquad V \searrow$	١,	NI	compliance with RULE 1104. wable for a newly drilled or despended by a tabulation of the deviation
They I lemon		If this is a request for allowell, this form must be accomp	panied by a tabulation of the deviation
J GREGORY MERRION, President		tests taken on the well in acc	nust be filled out completely for allow
(Title) able on new and recompleted water.			A IN for changes of owner
10/20/81	aie)	Fill out only Sections I. well name or number, or transp	II. III, and VI for change of condition order, or other such change of condition
ען	 ,	Separate Forms C-104 m	ust be filed for each pool in multipl

STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

. ** (*** ****	1440		
DISTRIBUTION			
BANTA FE			
FILE			
U.1.G.4.			
LAND OFFICE			
TRANSPORTER	ان		
THARD ON EN	DAS		
OPERATOR			
PHORATION OFFICE			

OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

Form C-104 Revised 10-01-78 Format 06-01-83 Page 1

REQUEST FOR ALLOWABLE AND

La JAN 05 1988

PROMATION OFFICE	AUTHOR	IZATION TO T	TRANSP	ORT OIL	AND NATUR	(AL GAS		
Operator								
Merrion Oil & Gas (Corp.			•		·		
Address								
P. O. Box 840, Farm	mington,	New Mexic	0 874	199				
Reoson(s) for filing (Check proper box)				(Other (Please	explain)		
New Well	Change In	Transporter of:						
Recompletion	011		X Dry	y Gas				
Change in Ownership	Capit	nghead Gas	c _°	ndensate				
If change of ownership give name								
and address of previous owner								
- PROPERTON OF WILL IND	TEACE					•		
II. DESCRIPTION OF WELL AND	Well No.	Pool Name, Inc	luding Fo	ormation		Kind of Lease		Lease No.
Chaco	1	WAW Fruit	land/	Picture	d Cliffs	State, Federal or F	•• Federal	NM 22046
Location 1846		NOr	th.		1 896	Feet From The	West	
Unit Letter F : 1846	Feet Fro	m The	Lin	e and		restrict ine		
10 _	ship 2	6N Ro	inge	12W	, имрм	, San	Juan	County
Line of Section 10 Town	-							
III. DESIGNATION OF TRANSPO	DTTP OF	OIL AND NA	TTIRAL	GAS				
Name of Authorized Transporter of Cil	Or C	ondensate	1 Old II	Address (Give address i	to which approved co	opy of this form is	to be sent)
Name of Authorized Hallaportor of the	_							
Name of Authorized Transporter of Casis	achead Gas [or Dry Gas	187	Address (Give address	so which approved co	opy of this form is	to be sent)
			ره	1		, El Paso, T		
El Paso Natural Ga		T	Rge.		ually connect			-
If well produces oil or liquids,	Unit Sec	Twp.	i troa.	Yes			e, 1977	
give location of tanks.			l	1				
If this production is commingled with	that from a	ny other lease	or pool,	give comm	ingling orde	unupet:		

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of

Decir compiled with and the	9
my knowledge and belief.	•
	Signature)
· /	or Euror m 4 \
Operations Man	ager
Operations Man	Itilei
	(,
1/4/88	
	(Date)

OIL CONSERVA	ATION DIVISION
APPROVED	JAN 0,5, 1988
BY_STRUCKS.	Jav2/
	SUPERVISOR DISTRICT # 8

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or despended well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with MULE 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.

Separate Forms C-104 must be filed for each pool in multiply completed wells.