

District I
PO Box 1980, Hobbs, NM 88241-1980
District II
PO Drawer DD, Artesia, NM 88211-0719
District III
1000 Rio Brans Rd., Aztec, NM 87410
District IV
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION
PO Box 2088
Santa Fe, NM 87504-2088

Form C-104
Revised February 10, 1994
Instructions on back
Submit to Appropriate District Office
5 Copies

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

¹ Operator name and Address J. K. Edwards Associates Inc. 1401 17th Street, Suite 1400 Denver, Colorado 80202		² OGRID Number 011307
		³ Reason for Filing Code CH
⁴ API Number 30 - 0 45-22788	⁵ Pool Name WAW Fruitland (PC)	⁶ Pool Code
⁷ Property Code	⁸ Property Name Tenneco Federal	⁹ Well Number 1

II. ¹⁰ Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West line	County
M	8	26N	12W		800	South	800	West	San Juan

¹¹ Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
M	8	26N	12W		800	South	800	West	San Juan
¹² Lee Code F	¹³ Producing Method Code	¹⁴ Gas Connection Date	¹⁵ C-129 Permit Number	¹⁶ C-129 Effective Date	¹⁷ C-129 Expiration Date				

III. Oil and Gas Transporters

¹⁸ Transporter OGRID	¹⁹ Transporter Name and Address	²⁰ POD	²¹ O/G	²² POD ULSTR Location and Description
01057	EL PASO NATURAL GAS PO BOX 4990 WASHINGTON NM 87159			

IV. Produced Water

²³ POD	²⁴ POD ULSTR Location and Description

V. Well Completion Data

²⁵ Spud Date	²⁶ Ready Date	²⁷ TD	²⁸ FBTD	²⁹ Perforations
³⁰ Hole Size	³¹ Casing & Tubing Size	³² Depth Set	³³ Sacks Cement	

VI. Well Test Data

³⁴ Date New Oil	³⁵ Gas Delivery Date	³⁶ Test Date	³⁷ Test Length	³⁸ Tbg. Pressure	³⁹ Csg. Pressure
⁴⁰ Choke Size	⁴¹ Oil	⁴² Water	⁴³ Gas	⁴⁴ AOF	⁴⁵ Test Method

⁴⁶ I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. Signature: <i>J. Keith Edwards</i>		OIL CONSERVATION DIVISION	
Printed name: J. KEITH EDWARDS		Approved by: <i>378</i>	
Title: PRESIDENT		Title: SUPERVISOR DISTRICT #3	
Date: 12/7/94		Approval Date:	
Phone: 303/2981400			
⁴⁷ If this is a change of operator fill in the OGRID number and name of the previous operator Merit Energy Company			
014591 <i>Sheryl J. Carruth</i>		Sheryl J. Carruth Regulatory Manager	
Previous Operator Signature		Printed Name Title Date	
		5/19/94	

THIS COPY

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other	7. If Unit or CA, Agreement Designation
2. Name of Operator MERIT ENERGY COMPANY (formerly Southern Union Exploration)	8. Well Name and No. Tenneco Fed. #1
3. Address and Telephone No. 12222 Merit Drive, Suite 1500 - Dallas, Texas 75251	9. API Well No. 30-045-22788
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 800' FSL & 800' FWL Sec. 8, T26N, R12W	10. Field and Pool, or Exploratory Area WAW Fruitland (PC)
	11. County or Parish, State San Juan New Mexico

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other Change of Operator
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

Effective May 1, 1994 J. K. Edwards Associates Inc. whose address is:

1401 17th St. Suite 1400
Denver, Colorado 80202

will assume operations of said well.

RECEIVED
DEC 20 1994
OIL CON. DIV.
LIFE 3

14. I hereby certify that the foregoing is true and correct

Signed [Signature]

Title Regulatory Manager

(This space for Federal or State office use)

Approved by

Conditions of approval, if any:

Title

DEC 16 1994

FARMINGTON DISTRICT OFFICE

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.