

SANTA FE

FILE

U.S.C.S.

LAND OFFICE

TRANSPORTER

OIL

GAS

OPERATOR

PRORATION OFFICE

Operator

Merrion Oil & Gas Corporation

Address

P. O. Box 1017, Farmington, New Mexico 87499

Reason(s) for filing (Check proper box)

New Well

Recompletion

Change in Ownership

Change in Transporter of:

Oil

Casinghead Gas

Dry Gas

Condensate

If change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name

Sullivan A

Well No.

2

Pool Name, including Formation

Gallegos Gallup

Kind of Lease

State, Federal or Fee

Federal SF

Lease No.

080384

Location

Unit Letter

D

:

790

Feet From The

North

Line and

790

Feet From The

West

Line of Section

10

Township

26N

Range

12W

NMPM,

San Juan

County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil

Permian Corporation

Name of Authorized Transporter of Casinghead Gas

El Paso Natural Gas Company

If well produces oil or liquids, give location of tanks.

Unit

D

Sec.

10

Twp.

26N

Pge.

12W

Is gas actually connected?

No

When

As soon as possible

Address (Give address to which approved copy of this form is to be sent)

P. O. Box 1702, Farmington, New Mexico 87499

Address (Give address to which approved copy of this form is to be sent)

P. O. Box 4990, Farmington, New Mexico 87499

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

COMPLETION DATA

Designate Type of Completion - (X)

Oil Well

XX

Gas Well

New Well

XX

Workover

Deepen

Plug Back

Same Res't.

Diff. Res

Date Spudded

6/26/84

Date Compl. Ready to Prod.

7/26/84

Total Depth

5290' KB

P.B.T.D.

5242' KB

Elevations (DF, RKB, RT, GR, etc.)

6084' KB, 6061' GL

Name of Producing Formation

Gallup

Top Oil/Gas Pay

5028

Tubing Depth

5026' KB

Perforations

5028, 5031, 5036, 5053, 5064, 5140, 5145, 5150, 5157, 5165, 5170, 5174, 5195, 5198, 5202, total 15 holes, 0.34" diameter

Depth Casing Shoe

5283

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE

CASING & TUBING SIZE

DEPTH SET

SACKS CEMENT

12-1/4

8-5/8", 24 #/ft, J-55

200' 225'

170 sx (350.2 cu. ft.)

7-7/8"

4-1/2", 10.5 #/ft, J-55

5283'

225 sx (274.5 cu. ft.)

700 sx (1442 cu. ft.)

2-3/8"

5026' KB

100 sx (206 cu. ft.)

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

Date First New Oil Run To Tanks

7/28/84

Date of Test

8/31/84

Producing Method (Flow, pump, gas lift, etc.)

Flowing

Length of Test

24 hours

Tubing Pressure

20

Casing Pressure

325

Choke Size

3/4

Actual Prod. During Test

Oil-Bbls.

8

Water-Bbls.

0

Gas-MCF

25

(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)

GAS WELL

Actual Prod. Test-MCF/D

Length of Test

Bbls. Condensate/MCF

Gravity of Condensate

Testing Method (pilot, back pr.)

Tubing Pressure (Shot-in)

Casing Pressure (Shot-in)

Choke Size

CERTIFICATE OF COMPLIANCE

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.

Steve S. Dunn, Operations Manager

9/4/84

OIL CONSERVATION COMMISSION

APPROVED

SEP 14 1984

BY

Original Signed by FRANK T. CHAVEZ

TITLE

SUPERVISOR DISTRICT # 3

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

If this is a request for allowable for a newly drilled or deepen well, this form must be accompanied by a tabulation of the deviate tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for all wells on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of own well name or number, or transporter, or other such change of condition.