

## OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-1-78

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SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

1. Operator  
Merrion Oil & Gas Corporation  
Address  
Post Office Box 1017, Farmington, New Mexico 87499

Reason(s) for filing (Check proper box)

New Well ☒ Change in Transporter of:  
Recompletion ☐ Oil ☐ Dry Gas ☐  
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

Other (Please explain)

If change of ownership give name  
and address of previous owner

RECEIVED  
JUN 05 1984  
OIL CON. DIV.  
DIST. 3

## DESCRIPTION OF WELL AND LEASE

Lease Name Charley	Well No. 2	Pool Name, including Formation Gallegos Gallup Extension	Kind of Lease State, Federal or Fee Indian	Lease No. NOO-C-1.
Location Unit Letter <u>O</u> ; <u>490</u> Feet From The <u>South</u> Line and <u>1850</u> Feet From The <u>East</u> Line of Section <u>21</u> Township <u>27N</u> Range <u>13W</u> , NMPM, San Juan County				

## DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Permian Corporation	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1702, Farmington, New Mexico 87499
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit <u>O</u> Sec. <u>21</u> Twp. <u>27N</u> Rge. <u>13W</u> Is gas actually connected? <u>No</u> When <u>As soon as possible</u>

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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res.
Date Spudded 5/14/84	Date Compl. Ready to Prod. 6/02/84	Total Depth 5335' KB	P.B.T.D. 5293' KB					
Elevations (DF, RKB, RT, GR, etc.) 6060' KB, 6055' GL	Name of Producing Formation Gallup	Top Oil/Gas Pay 5187' KB	Tubing Depth 5187' KB					
Perforations 5187' - 5207' KB and 5212' - 5234' KB; 1 hole/ft. 0.38". 42 holes total						Depth Casing Shoe 5335' KB		
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT				
12-1/4"	8-5/8"	222' KB		175sx (360.5 cu.ft.) B				
7-7/8"	4-1/2"	5335' KB		225sx (274.5 cu.ft.) H				
				700sx (1442 cu.ft.) B				
	2 3/8	5187		50 sx (61 cu.ft.) H				

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)

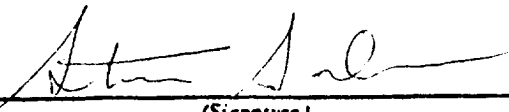
Date First New Oil Run To Tanks 6/1/84	Date of Test 6/2/84	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 Hour	Tubing Pressure --	Casing Pressure 100	Choke Size 3/4
Actual Prod. During Test	Oil - Bbls. 259	Water - Bbls. Trace	Gas - MCF 300

## GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

## 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 above is true and complete to the best of my knowledge and belief.

  
(Signature)

Steve S. Dunn, Operations Manager

(Title)

6/4/84

(Date)

## OIL CONSERVATION DIVISION

JUN 07 1984

APPROVED

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 deepened 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 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.