

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator
Merlin Exploration, Inc.

Address
P.O. Box 3164 - Tulsa, OK 74101

Reason(s) for filing (Check proper box)

☐ New Well	Change in Transporter of:	Other (Please explain)
☐ Recompletion	☐ Oil	
☒ Change in Ownership	☐ casinghead Gas	
	☐ Dry Gas	
	☐ Condensate	

If change of ownership give name and address of previous owner: Sun Exploration and Production Co. - P.O. Box 2800 - Dallas, TX 75221-288

II. DESCRIPTION OF WELL AND LEASE

Lease Name State of TX B A/C 1	Well No. 2	Pool Name, including Formation Bagley, N Penn State	Kind of Lease State, Federal or Private State	Lease No. 120098401
Location Unit Letter 11 660 Feet From The N Line and 1980 Feet From The E				
Line of Section 11 Township 12N Range 33E . NMPM Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

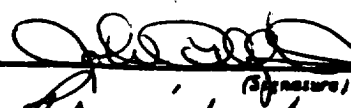
Name of Authorized Transporter of Oil ☒ or Condensate ☐ Conoco	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1183 - Houston, TX 77001 P.O. Box 1267 - Ponca City, OK 74603
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐ Gulf Oil	Address (Give address to which approved copy of this form is to be sent) P.O. Box 2063 - Houston 77001
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? when

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

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

VI. CERTIFICATE OF COMPLIANCE

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 my knowledge and belief.


(Signature)
President
(Title)
1-4-85
(Date)

OIL CONSERVATION DIVISION

FEB 15 1985

APPROVED _____, 19 ____
BY ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR
TITLE _____

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

RECEIVED

JAN 11 1985

**C.S.D.
HOUS. OFFICE**