

Submit 5 Copies  
Appropriate District Office  
[STRICT I]  
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-104  
Revised 1-1-89  
See Instructions  
at Bottom of Page

**OIL CONSERVATION DIVISION**  
P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

[STRICT II]  
P.O. Drawer DD, Artesia, NM 88210

[STRICT III]  
600 Rio Brazos Rd., Aztec, NM 87410

**REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS**

Operator: Merit Energy Company  
Well API No.: 30-025-30750

Address: 12221 Merit Drive, Suite 500, Dallas, TX 75251

Reason(s) for Filing (Check proper box):  
New Well  Change in Transporter of:  
Completion  Oil  Dry Gas   
Change in Operator  Casinghead Gas  Condensate  Effective 1-1-92

Change of operator give name and address of previous operator: Bridge Oil Company, L.P., 12404 Park Central Dr., Suite 400, Dallas, TX 75251

**DESCRIPTION OF WELL AND LEASE**

Case Name: Langlie Mattix Queen Unit  
Well No.: 44  
Pool Name, Including Formation: Langlie Mattix 7 Rivers Queen  
Kind of Lease: State, Federal or Fee  
Lease No.:

Location: Unit Letter D; 1300 Feet From The North Line and 175 Feet From The West Line  
Section 14 Township 25S Range 37E, NMPM, Lea County

**I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS**

Name of Authorized Transporter of Oil  or Condensate   
Shell Pipeline  
Address (Give address to which approved copy of this form is to be sent): P. O. Box 2648, Houston, TX 77252

Name of Authorized Transporter of Casinghead Gas  or Dry Gas   
 Sid Richardson ~~Carbon~~ Gasoline Co.  
Address (Give address to which approved copy of this form is to be sent): 201 Main St., Suite 3000, Ft. Worth, TX 76102

Well produces oil or liquids, gas, or geothermal steam?   
Location of tanks: Unit D Sec. 14 Twp. 25S Rge. 37E  
Is gas actually connected?  Yes  
When? May 8, 1990

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

**COMPLETION DATA SID RICHARDSON GASOLINE CO. - Eff. 01/13**

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Observations (DF, RKB, RT, GR, etc.)	Name of Producing Formation			Top Oil/Gas Pay		Tubing Depth		
Formations						Depth Casing Shoe		

**TUBING, CASING AND CEMENTING RECORD**

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

**TEST DATA AND REQUEST FOR ALLOWABLE**

**L 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 Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

**AS 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

**I. OPERATOR 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: Sheryl J. Carruth  
Printed Name: Sheryl J. Carruth  
Date: 1-22-92  
Title: Regulatory Manager  
Telephone No.: (214) 701-8377

**OIL CONSERVATION DIVISION**

Date Approved: JAN 27 '92  
By: ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR  
Title: \_\_\_\_\_

**FOR RECORD ONLY ADD 30 1993**

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.