

District I

## State of New Mexico

Form C-104

Energy, Minerals &amp; Natural Resources Department

Revised February 10, 1994

Instructions on back

Submit to Appropriate District Office

5 copies

## OIL CONSERVATION DIVISION

PO Box 2088

Santa Fe, NM 87504-2088

☐ AMENDED REPORTDistrict II  
PO Box 2088, Artesia, NM 88211-0719District IV  
1000 Rio Brazos Rd., Aztec, NM 87410

PO Box 2088, Santa Fe, NM 87504-2088

## I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

1. Operator name and Address Merit Energy Company 12222 Merit Drive, Suite 1500 Dallas, TX 75251		2. OGRID Number 014591
		3. Reason for Filing Code CG Effective 10-1-94
4. API Number 30-015-20716	5. Pool Name South Carlsbad (Morrow)	6. Pool Code 73960
7. Property Code 007725	8. Property Name Stephens A Com	9. Well Number 1

## II. Surface Location

UL or Lot no. N	Section 7	Township 23S	Range 27E	Lot. Idn	Feet from the 810	North/South Line South	Feet from the 1980	East/West line West	County Eddy
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## 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
12. Lse Code	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
032109	Hadson Gas Gathering & Processing P. O. Box 1320, Hobbs, NM 88240	1891631	G	N SEC. 7 T23S R27E
018053	Pride Pipeline P. O. Box 2436, Abilene, TX 79604	1891610	O	N SEC. 7 T23S R27E

## IV. Produced Water

23. POD	24. POD ULSTR Location and Description
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## V. Well Completion Data

25. Spud Date	26. Ready Date	27. TD	28. PBTD	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 compiled with and that the information given above is true and complete to the best of my knowledge and belief.

## OIL CONSERVATION DIVISION

Signature:

Approved by:

Printed name:

Title:

Title:

Approval Date:

Date:

Phone:

5/1/95

(214) 701-8377

47. If this is a change of operator fill in the OGRID number and name of the previous operator

Previous Operator Signature

Printed Name

Title

Date

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

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Amarillo, NM 87410

State of New Mexico  
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

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

JUL 27 1992

O. C. D.  
OFFICE

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

Operator Merit Energy Company	Well API No.
Address 12221 Merit Drive, Suite 1040, Dallas, TX 75251	
Reason(s) for Filing (Check proper box) New Well <input type="checkbox"/> Change in Transporter of: <input type="checkbox"/> Other (Please explain) Recompletion <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> EFFECTIVE 7/1/92 Change in Operator <input checked="" type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
If change of operator give name and address of previous operator Bridge Oil Company, L.P., 12404 Park Central Dr., Ste. 400, Dallas, TX 75251	

II. DESCRIPTION OF WELL AND LEASE

Lease Name Stephens A Com	Well No. 1	Pool Name, Including Formation South Carlsbad (Morrow)	Kind of Lease State, Federal or Fee	Lease No.
Location Unit Letter N : 1980 Feet From The W Line and 810 Feet From The S Line Section 7 Township 23S Range 27E, NMPM, Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil Pride Pipeline	or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) P. O. Box 2436, Abilene, TX				
Name of Authorized Transporter of Casinghead Gas Llano, Inc. / Transwestern Pipeline	or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) Hobbs, N.M., Box 2521, Houston, TX 77001				
If well produces oil or liquids, give location of tanks.	Unit N	Sec. 7	Twp. 23S	Rge. 27E	Is gas actually connected? Yes	When? 7/25/73

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

IV. COMPLETION DATA

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.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing Shoe			

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

V. 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 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

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

VI. 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 Joe A. Marek V.P.  
Printed Name Joe A. Marek Title  
Date 7/15/92 Telephone No. 214 701 8377

OIL CONSERVATION DIVISION

Date Approved JUL 28 1992

By Mike Williams

Title SUPERVISOR, DISTRICT II

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.