Submit 3 Copies To Appropriate District	State of New Mexico		Form C-103
Office District I	Energy, Minerals and Natural Resources		May 27, 2004
1625 N. French Dr., Hobbs, NM 88240	nch Dr., Hobbs, NM 88240		WELL API NO.
<u>District II</u> 1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION		30-015-05435
District III	1220 South St. Francis Dr.		5. Indicate Type of Lease STATE FEE
1000 Rio Brazos Rd., Aztec, NM 87410 District IV Santa Fe, NM 87505		6. State Oil & Gas Lease No.	
1220 S. St. Francis Dr., Santa Fe, NM			
87505			BLM LC-029295-B
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A			7. Lease Name or Unit Agreement Name
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH			Turner "B"
PROPOSALS.)			8. Well Number 47
1. Type of Well: Oil Well	Gas Well Other	RECEIVED	
2. Name of Operator			9. OGRID Number 14591
Merit Energy Company 3. Address of Operator		<u> JUN - 9 2006</u>	10. Pool name or Wildcat
13727 Noel Road, Suite 500, Dalla	s. Texas 75240	QCD-AMTECIA	Grayburg-Jackson
4. Well Location			
Unit Letter : 560 feet from the north line and 1980 feet from the east line			
Section 29	Township 17-S	Range 31-E	NMPM Eddy County
11. Elevation (Show whether DR, RKB, RT, GR, etc.)			
Pit or Below-grade Tank Application □ or Closure □			
Pit type Depth to Groundwater Distance from nearest fresh water well Distance from nearest surface water			
Pit Liner Thickness: mil Below-Grade Tank: Volumebbls; Construction Material			
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐ REMEDIAL WORK ☐ ALTERING CASING ☐			
TEMPORARILY ABANDON			
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB			
OTHER:		OTHER: MIT Te	st
12. Describe proposed or completed energions. (Clearly state all partinent details, and give portinent detail including estimated data			
13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion			
or recompletion.			
of recompletion.			
04/10/2006 - Conduct NMOCD MIT Test. Well tested ok. Returned to injection. Origingal chart to NMOCD with Field Inspector.			
I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-			
grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan .			
SIGNATURE / Y	1 Sanker TITLE	SR. Regulatory Analy	vstDATE_06/06/2006_
Type or print name	E-mai	il address:	Telephone No.
For State Use Only		ated for to	
APPROVED BY:	TITI 1	ACCON TWOCO / O	DATE
Conditions of Approval (if any):	11111	address:	
11 \ 7/			