

OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501DUAL COMPLETION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS3073/N
11-8-83RECEIVED
SEP 30 1983
OIL CON. DIV.
DIST. 3

I.

Operator	
Merrion Oil & Gas Corporation	
Address	
P. O. Box 1017, Farmington, New Mexico 87499	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please Explain)	
If change of ownership give name and address of previous owner	

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease
Canada Mesa Com	4E	Devils Fork Gallup	State, Federal or Fee Fee	
Location				
Unit Letter	F	1520 Feet From The	North Line and	1650 Feet From The West
Line of Section	10	Township	24N	Range 6W, NMPM, Rio Arriba Co

I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Permian Corporation	P. O. Box 1702, Farmington, New Mexico					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
El Paso Natural Gas Company	P. O. Box 4990, Farmington, New Mexico					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	F	10	24N	6W	No	As soon as possible

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. F
	XX		XX					
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
6/26/83	9/21/83	6690' KB	6628' KB					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
6441' GL, 6454' KB	Gallup	5354' KB	5357' KB					
Perforations			Depth Casing Shoe					
5550 - 5572' KB, 2PF, 44 holes; 1 hole each - 5354, 5364, 5376, 5382, 5392, 5416, 5418, 5420, 5422, 5434, 5436, 5438, 5440, 5447, 5449.			6674' KB					
TUBING, CASING, AND CEMENTING RECORD 5460, total 16 holes								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12-1/4"	8-5/8"	210' KB	175 sx (360.5 cu. ft.)					
7-7/8"	4-1/2"	6674' KB	450 sx (549 cu. ft.)					
			700 sx (1442 cu. ft.)					
	1'1/2	5357' KB	100 sx (122 cu. ft.)					

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 of hole for this depth or be for full 24 hours)

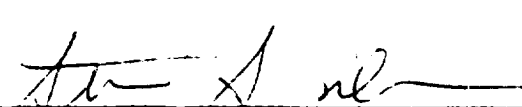
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
9/27/83	9/28/83	Flowing	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hour	145	380	3/4
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
	62	-0-	282

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

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

9/28/83 (Title)

(Date)

OIL CONSERVATION DIVISION

APPROVED

SEP 30 1983

BY

Original Signed by

TITLE

SUPERVISOR DISTRICT 3

This form is to be filed in compliance with RULE 110a.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the device tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for all wells 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.