

SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRODUCTION OFFICE		

Operator

Merrion Oil & Gas Corporation

Address

P. O. Box 1017, Farmington, New Mexico 87401

Reason(s) for filing (Check proper box)

New Well ☒

Change in Transporter of:

Recompletion ☐Oil ☐Dry Gas ☐Change in Ownership ☐Casinghead Gas ☐Condensate ☐

Other (Please explain)

If change of ownership give name
and address of previous owner

I. DESCRIPTION OF WELL AND LEASE

Lease Name Salazar G 34	Well No. 1	Pool Name, including Formation Devils Fork Gallup	Kind of Lease State, Federal or Fee Federal	Lease No. SF0801
Location Unit Letter K ; 1630 Feet From The South Line and 1660 Feet From The West Line of Section 34 Township 25N Range 6W , NMPM, Rio Arriba				

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Permian Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1702, Farmington, New Mexico 87401					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 990, Farmington, New Mexico 87401					
If well produces oil or liquids, give location of tanks.	Unit K	Sec. 34	Twp. 25N	Rge. 6W	Is gas actually connected? No	When As soon as possible

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

V. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well XXX	Gas Well	New Well XXX	Workover	Deepen	Plug Back	Same Res't.	Diff.
Date Spudded 11/15/82	Date Compl. Ready to Prod. 2/10/82	Total Depth 5850' KB	P.B.T.D. 5800' KB					
Elevations (DF, RKB, RT, GR, etc.) 6387' GL	Name of Producing Formation Gallup	Top Oil/Gas Pay 5480' KB	Tubing Depth 5470' KB					
Perforations 5480 - 5708 KB			Depth Casing Shoe 5850' KB					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE 12-1/4"	CASING & TUBING SIZE 8-5/8"	DEPTH SET 200' KB		SACKS CEMENT 170 sx Cement				
7-7/8"	4-1/2"	5850' KB		175 sx Class 'H' 2% C				
				600 sx Class 'B' 2% I				
				100 sx Class 'B' 2% I				

VI. 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
able for this depth or be for full 24 hours)

Date First New Oil Run To Tanks 2/9/82	Date of Test 1/10/82	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 3 hours	Tubing Pressure	Casing Pressure 150	Choke Size 1/2"
Actual Prod. During Test	Oil-Bbls. 20.6	Water-Bbls. -0-	Gas-MCF 62

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

I hereby certify that the rules and regulations of the Oil Conservation
Commission have been complied with and that the information given
above is true and complete to the best of my knowledge and belief.

Steve S. Dunn, Operations Manager

2/10/82

(Title)

(Date)

OIL CONSERVATION COMMISSION

APPROVED

BY Original Signed by FRANK T. CHAVEZ

SUPERVISOR DISTRICT #3

TITLE

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deep
well, this form must be accompanied by a tabulation of the dev
tests taken on the well in accordance with RULE 111.All sections of this form must be filled out completely for
able on new and recompleted wells.Fill out only Sections I, II, III, and VI for changes of c
well name or number, or transporter, or other such change of conc