

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

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Supersedes Old C-104 and
Effective 1-1-65

Operator
Merrion Oil & Gas Corporation
Address
Post Office Box 1017, Farmington, New Mexico 87499

Reason(s) for filing (Check proper box)	
New Well <input type="checkbox"/>	Change in Transporter of: Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/>
Recompletion <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	

Other (Please explain)

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name Jalapeno	Well No. 1	Pool Name, including Formation Dufers Point Gallup Dakota Ext.	Kind of Lease State, Federal or Fee	State IG	Lease # 1288
Location Unit Letter <u>C</u> : <u>790</u> Feet From The <u>North</u> Line and <u>1650</u> Feet From The <u>West</u> Line of Section <u>16</u> Township <u>25N</u> Range <u>8W</u> , NMPM, San Juan Cour					

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> CONOCO, INC. Surface Transportation	Address (Give address to which approved copy of this form is to be sent) 555 17th Street, 9th Floor, Denver, CO 80202					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Northwest Pipeline Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1526, Salt Lake City, Utah 84110					
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 16	Twp. 25N	Rge. 8W	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:

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. R.
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

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, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

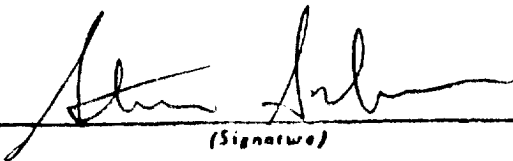
RECEIVED
NOV 02 1984
OIL CON. DIV. 1
DIST. 3

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.

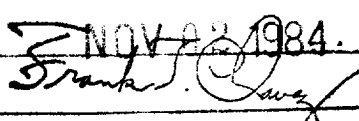


OPERATIONS MANAGER

(Title)

October 30, 1984

OIL CONSERVATION COMMISSION

APPROVED  , 19
BY
TITLE SUPERVISOR DISTRICT # 3

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 devils tests taken on the well in accordance with RULE 111.
All portions 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 ownership.