

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
Artesia, NM 88210

SUBMIT IN TRIP
(Other Instructions)

Budget Bureau No. 1004-0135
Expires August 31, 1985

ckf

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. ☐ OIL WELL ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR
Merit Energy Company

3. ADDRESS OF OPERATOR
12221 Merit Drive, Suite 500, Dallas, TX 75251 O. C. D.

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)
At surface
See Below 66015 6601E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

RECEIVED

JUN 15 1992

5. LEASE DESIGNATION AND SERIAL NO.
NM-29208; NMNM35158

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
See Below Rick Fed

9. WELL NO.
See Below #2

10. FIELD AND POOL, OR WILDCAT
Pecos Slope Abo

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
See Below

12. COUNTY OR PARISH
Chaves

13. STATE
NM

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

(Other) ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETION ☐

ABANDON* ☐

CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

FRACTURE TREATMENT ☐

SHOOTING OR ACIDIZING ☐

(Other) ☒ Commingle Production

REPAIRING WELL ☐

ALTERING CASING ☐

ABANDONMENT* ☒ XX

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

Merit Energy Company is requesting approval to commingle production from the following wells. This request is being made as the prior operator, McClellan Oil Corporation, never requested approval.

See attachment

✓ Rick Federal #2 Sec. 23, T9S, R25E, 660' FSL & 660' FEL
Jill Federal #1 Sec. 24, T9S, R25E, NE 1/4 of SW 1/4



18. I hereby certify that the foregoing is true and correct

SIGNED Sherry Carruth TITLE Regulatory Manager

DATE 5-5-92

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

*See Instructions on Reverse Side

