| | • | |
|-------------|----------|--------|
| Appropriate | District | Office |

DISTRICT I

P.O. Box 1980, Hobbs, NM 88240

DISTRICT II

P.O. Drawer DD, Artesia, NM 88210

DISTRICT III

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1000 Rio Brazos Rd, Aztec, NM 87410

| 1000 | K.10 | Brazos | μа, | AZIOC, | LI WI | 0/4 |
|------|------|--------|-----|--------|-------|-----|
| | | | | | | |

| | State of New | Mexico |
|------|----------------------|----------------------|
| Ener | finerals and Natural | Resources Department |

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

RECEIVED

CCT 1 9 1992

O. C. D.

i X

Form C-104 Revised 1-1-89 See Instructions At Bottom of Page

| CISE |
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| Ĩ |

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

| operation | | | | Well API No. 20 015 04558 | | | | | | |
|--|-----------------------------------|---------------|-------------------------------------|---|---------------------|---------------------|---------------------|-----------------------|------------|--|
| MERIT ENERGY COMPANY | | | | | 30-015-04 | 558 | | | | |
| 12221 MERIT DRIVE, SUITE 500, DALLAS, TEXAS 75251 | | | | | | | | | | |
| Reason(s) for Filing New Well | | Change in 7 | ransporter of: | | | | | | | |
| Recompletion | npletion Oil Dry Gas | | | | | | | | | |
| Change of Operator XX If change of operator give name | Casinghead Ga | • | Condensate | | | | | | ····· | |
| and address of previous operator GREENHILL PETROLEU | | ATION | 16010 DADVED'S DO | INT I N | SUITE 325 | HOUSTON | TY 77079 | | | |
| II. DESCRIPTION OF WE | | | 10010 BARRER 3 FO | int Lit, | 3011E 525, | | , 17 //0/2 | | | |
| Lease Name Well No. Pool Name, Including Formatio | | | | | | | | | | |
| NORTH BENSON QUEEN | UNIT | 45 | BENSON QUEEN GR | AYBUR | G, NORTH | FEDERAL LC-028978B | | | | |
| Unit Letter | I | 1980 | Feet From The | SOUTH | Line and | 660 | Feet From The | Feet From The EAST Li | | |
| Section 33 | Township 185 | i | - Range 30E | | - NMPM | | | County EDDY | | |
| III. DESIGNATION OF TH | | ER OF C | | GAS | | | | | | |
| Namer of Authorized Transporter of O | | | or Condensate | | | - | proved copy of this | | 77060 | |
| TEXACO TRADING & TR Name of Authorized Transporter of Cas | | ATION | | | 10625 N. C | | | HOUSTON, TX | | |
| NONE | | | | | | | | | , | |
| If well produces oil or liquids, | | | Unit | Sec. | Тwp | Rge | Is gas actually o | onnected? | When? | |
| give location of tanks. | | <u> </u> | I | 28 | 185 | 30E | NO | | | |
| If this production is commingled with the IV. COMPLETION DATA | | r lease or po | oi, give comminging order num | ber: | | | | | | |
| IV. COMILETION DATA | | Oil Well | Gas well | New Well | Workover | Deepen | Plug Back | Same Res'v | Diff Res'v | |
| Designate Type of Completi | ion - (X) | | | | | | | | | |
| Date Supdded | Date Compl. R | cady to Prod | • | Total Depth | | | P.B.T.D. | • | | |
| Elevations (DF, RKB, RT, GR, etc.) | Name of Produ | | | Top Oil/Gas | Day | | Tubing Depth | | | |
| Elevations (DF, RKB, R1, OK, etc.) | Name of Produ | cing roman | | Top Our Oas | rey | | r uonig bopui | | | |
| Perforations | L | | | | | | Depth Casing Sl | 100 | | |
| | | | | | | | | <u>.</u> | <u>.</u> | |
| TUBING, CASING AND CEMENTING F HOLE SIZE CASING & TUBING SIZE | | | RECORD DEPTH SET | | | | SACKS CEMENT | | | |
| HOLE SIZE | CASIN | | SING SIZE | 1 | JEPTH SET | · | $-\rho$ | Part TA-3 | | |
| | | | | + | | | 16-23-52 | | | |
| | | | | | | | chy op | | | |
| V. TEST DATA AND REQ | ULEST FOI | | | | | ···· | | ~ / | | |
| | | | of load oil and ust be qual to or e | acceed top allo | wable for this dept | h or be for full 24 | hours.) | | | |
| Date First New Oil Run To Tank | Date of Test | | | Producing Method (Flow, pump, gas lift, etc.) | | | | | | |
| | | | | | | | | | | |
| Length of Test | Tubing Pressur | • | | Casing Press | ing Pressure | | | Choke Size | | |
| Actual Prod. During Test | Oil - Bbls. | | • • • | Water - Bble | | | Gas - MCF | | | |
| Adding Flot. During Test | OL BOIL. | | | | | | | | | |
| GAS WELL | L | | | L | | | | | | |
| Actual Prod. Test - MCF/D Length of Test Bb | | Bbls. Conde | nsate/MMCF | | Gravity of Cond | crussic | | | | |
| | | | | | | | | | | |
| Testing Method (pilot, back pr.) | .) Tubing Pressure (Shut-in) Casi | | Casing Pressure (Shut-in) | | Choke Size | | | | | |
| VI. OPERATOR CERTIFIC | | OMPLIA | NCE | | | | | | | |
| | | | | | | NSERVA | TION DI | VISION | | |
| I 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. | | | Date Approv | ved | 00 | T 1 9 1992 | | | | |
| IS THE REPORT OF THE DESI OF THE REPORT OF REPORT OF REPORT OF THE PARTY OF THE PAR | | | Dure Appro | | , , | | | | | |
| Atres of Lugar | | | By ORIGINAL SIGNED BY | | | | | | | |
| Signiture | | MIKE WILLIAMS | | | | | | | | |
| SHERYL J. CARRUTH REGULATORY MGR. Printed Name | | | | Title | SUPE | RWISOR, DI | ISTRICT I | — | | |
| 10/08/92 (214)701-8377 | | | | | | | | | | |
| Date Telephone No. | | | | 1 | | | | · | | |

INSTRUCTION This form is to be filed in compliance with Rule 1104

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.

2) All sections of this form must be filed out for allowable on new and recompleted wells.

3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.

4) Separate Form C-104 must be filed for each pool in multiply completed wells.