Submit 5 Copies Appropriate District Office DISTRICT I

State of New Mexico Ener Minerals and Natural Resources Department

Form C-104 Revised 1-1-89

See Instructions At Bottom of Page

OIL CONSERVATION DIVISION P.O. Box 1980, Hobbs, NM 88240

DISTRICT II

P.O. Drawer DD, Artesia, NM 88210

DISTRICT III

1000 Rio Brazos Rd, Aztec, NM 87410

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS



Cl	SFO
	OX

I.					·					
Operator MERIT ENERGY COMPANY			30-015-10145							
Address 12221 MERIT DRIVE, SU	JITE 500, D	ALLAS,	TEXAS 75251					· · · · · · · · · · · · · · · · · · ·		
Reason(s) for Filing New Well			ransporter of:							
Recompletion	Oil Dry Gas				recearu	E ogrope	D 0 1000			
If change of operator give name	Change of Operator XX Casinghead Gas Condensate If change of operator give name			EFFECTIVE OCTOBER 2, 1992						
and address of previous operator GREENHILL PETROLET	IM COPPOI	D ATION	16010 PADVED'S D	OINT I N	CUITE 205	HOHOTON	TX/ 77070			
II. DESCRIPTION OF W	ELL AND L	EASE	10010 BARRER 3 P	OINT LN,	SUITE 325,	HOUSTON	, IX //0/9			
Lease Name	Well No. Pool Name, Including Format						St. Fed. or Fee	Lease No.	Lease No.	
NORTH BENSON QUEE	NUNII	NIT 26 BENSON QUEEN GRAYBURG, NORTH			FEDERAL NM-033775			5		
Unit Letter	М	660	Feet From The	SOUTH	_ Line and	660	Feet From The	WEST	Line	
Section 28	Township 185		Range 30E		NMPM			County EDDY		
III. DESIGNATION OF T		ER OF C	or Condensate	GAS	Address(Give ad	dress to which ap	proved copy of this	form is to be sent)		
TEXACO TRADING & T		ATION		Address(Give address to which approved copy of this form is to be sent) 16825 N. CHASE BLVD, STE 600 HOUSTON, TX 77060						
Name of Authorized Transporter of C NONE	asinghead Gas						address to which approved copy of this form is to be sent)			
If well produces oil or liquids,				Sec.	Twp	Rge	is gas actually o	connected?	When?	
give location of tanks.	1.6	L	I	28	18S	30E	NO			
If this production is commingled with IV. COMPLETION DATA		r lease or po	ol, give commingling order nur	mber;						
		Oil Well	Gas well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Ros'v	
Designate Type of Comple								,		
Date Supdded	Date Compl. R	eady to Prod.		Total Depth			P.B.T.D.		······································	
Elevations (DF, RKB, RT, GR, etc.)	ations (DF, RKB, RT, GR, etc.) Name of Producing Formation			Top Oil/Gas	Pay		Tubing Depth			
Perforations						Depth Casing Shoe				
							Doput Casing St	iioe		
HOLE SIZE			AND CEMENTING							
HOLE SIZE	CASING & TUBING SIZE			DEPTH SET			SACKS CEMENT			
							10-23-52			
							she of			
V. TEST DATA AND RE	QUEST FOR	ALLOV	/ABLE	_1		· · · · · · · · · · · · · · · · · · ·	1	-		
OIL WELL (Test must be		otal volume	of load oil and ust be qual to or				hours.)			
Date First New Oil Run To Tank	Date of Test			Producing Method (Flow, pump, gas lift, etc.)						
Length of Test	Tubing Pressure			Casing Pressure			Choke Size			
4.10.10.10										
Actual Prod. During Test	Oil - Bbls.			Water - Bbls.			Gas - MCF			
GAS WELL										
Actual Prod. Test - MCF/D	al 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				
VI. OPERATOR CERTIFICATE OF COMPLIANCE						·····	·			
I hereby certify that the rules and regulations of the Oil Consevation		OIL CONSERVATION DIVISION								
Division have been complied with and that the information given above						101011				
is true and complete to the best of my knowledge and belief.			Date Approved							
The sold work			ORIGINAL SIGNED BY							
Signifure			1	MIKE WILLIAMS						
SHERYL J. CARRUTH REGULATORY MGR. Printed Name			-	Title	SUPER	VISOR, DIS	STRICT IF	_		
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
- 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.