Submit 5 Copics				New Mexico		· Programme			Form C-104
Appropriate District Office		Energ	inerals and Nati	ural Resources	Department				Revised 1-1-89
DISTRICT I									See Instructions
P.O. Box 1980, Hobbs, NM 88240		OIL (CONSERVAT	IVID NOL	SION		REC	EIVED	At Bottom of Page
DISTRICT II			P.O. B	ox 2088			.,	*···	
P.O. Drawer DD, Artesia, NM 88210)		Santa Fe, New	Mexico 87504	-2088		(nom 1	. 9 1992	í
DISTRICT III			,				t 11	· 9 1552	N/SF
1000 Rio Brazos Rd, Aztec, NM 8741	.0						Q.	C. D.	TIT
, ,		REQU	EST FOR ALLOW	ABLE AND A	UTHORIZAT	ΓΙΟΝ	ARTEG	JESICE .	21
		T	O TRANSPORT O	IL AND NATI	JRAL GAS	_			\ ()P
I.									.]
Operator	ANIX			Wall API No).	20.015.10	200	/ 1	\/
MERIT ENERGY COMP.	ANI					30-015-10	398		\
12221 MERIT DRIVE, SU	JITE 500, D	ALLAS,	TEXAS 75251					V V	J
Resson(s) for Filing New Well			T					`\\\	
Recompletion	Oil	Change in	Transporter of: Dry Gas					\V '	
Change of Operator XX	Casinghead G	2.5	Condensate		EFFECTIV	E OCTOBE	R 2, 1992	<u> </u>	
If change of operator give name and address of previous operator									
GREENHILL PETROLEU	M CORPO	RATION	, 16010 BARKER'	S POINT LN.	SUITE 325.	HOUSTON	TX 77079		
II. DESCRIPTION OF W		LEASE							
Lease Name		Wall No.	Pool Name, Including Fo			1	St. Fed. or Fee	Lease No.	
NORTH BENSON QUEE	N UNIT	5	BENSON QUEEN	N GRAYBURG	i, NORTH	FEDERA	<u>L</u>	NM-033775	
Unit Letter	F	2310	Feet From The	NORTH	Line and	1750	Feet From The	WEST	Line
Section 27	Township 18		Range 30E		NMPM			County EDDY	
III. DESIGNATION OF T				AL GAS		INJECTIO	N WELL		
Namer of Authorized Transporter of C			or Condensate		Address(Give add		proved copy of this	form is to be sent)	
TEXACO TRADING & T	RANSPORT	ATION			16825 N. CHASE BLVD, STE 600 HOUSTON, TX				7060
Name of Authorized Transporter of Co	singhead Gas					Address (Give	address to which a	pproved copy of this form	is to be sent)
NONE If well produces oil or liquids,			Unit	Sec.	Twp	Rge	Us see setteelly s		1302
give location of tanks.			T .	28	18S	30E	Is gas actually o	onnected /	When?
If this production is commingled with	hat from any oth	er lease or po	ool, give commingling orde		100	JOE	1110	· · · · · · · · · · · · · · · · · · ·	
IV. COMPLETION DATA									_
		Oil Weil	Gas weli	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Designate Type of Complete	ion - (X)								
Date Supdded	Date Compl. R	cedy to Prod		Total Depth	•		P.B.T.D.	<u> </u>	
District Property and Constitution	<u> </u>								
Elevations (DF, RKB, RT, GR, etc.)	Name of Produ	icing Format	lon	Top Oil/Gas	Pay		Tubing Depth		
Perforations .						•	Depth Casing Sh		
							294.0		
	TUBING,	CASING	AND CEMENTIN	NG RECORD	······································		<u></u>	*****	
HOLE SIZE	CASIN								
			SING SIZE		EPTH SET			SACKS CEMEN	IT [
			SING SIZE	<u> </u>	EPTH SET		PA	SACKS CEMENT IP-3	(T
			SING SIZE	E	EPTH SET		PA	SACKS CEMEN - 10 - 3 - 23 - 9 2	/T
			SING SIZE	E	DEPTH SET		PA	SACKS CEMEN TIP-3 -23-92	IT
V. TEST DATA AND REG	OUEST FOR			Е	PEPTH SET		PA 10	SACKS CEMEN 7 10-3 -23-93 -23-93	IT .
V. TEST DATA AND REC	-	R ALLOV	WABLE				PA 10	SACKS CEMEN T IP - 3 - 23 - 93 hr ap 1	IT .
	-	R ALLOV		to or exceed top allows	vable for this depth		hours.)	SACKS CEMENT IP - 3 -23 - 93 hc apri	IT .
OIL WELL (Test must be	efter recovery of	R ALLOV	WABLE	to or exceed top allows			hours.)	SACKS CEMEN 7	IT
OIL WELL (Test must be	efter recovery of	R ALLOV	WABLE	to or exceed top allows	vable for this depth		hours.)	SACKS CEMEN 7	IT
OIL WELL (Test must be	after recovery of Date of Test	R ALLOV	WABLE	to or exceed top allow Producing Me	vable for this depth			SACKS CEMEN T IP - 3 - 23 - 93 he ap 1	IT
OIL WELL (Test must be	after recovery of Date of Test	R ALLOV	WABLE	to or exceed top allow Producing Me	vable for this depth			SACKS CEMENT IP-3	IT
OIL WELL (Test must be Date First New Oil Run To Tank Length of Test Actual Prod. During Test	Date of Test Tubing Pressure	R ALLOV	WABLE	Producing Me	vable for this depth		Choke Size	SACKS CEMENT IP-3 -23-93 he apri	IT
OIL WELL (Test must be Date First New Oil Run To Tank Length of Test Actual Prod. During Test GAS WELL	Date of Test Tubing Pressur Oil - Bbls.	R ALLOV	WABLE	Producing Me	vable for this depth		Choke Size	SACKS CEMENT IP - 3 -23 - 93 hr apri	IT
OIL WELL (Test must be Date First New Oil Run To Tank Length of Test Actual Prod. During Test	Date of Test Tubing Pressure	R ALLOV	WABLE	Producing Me	vable for this depth sthod (Flow, pump, are		Choke Size	1 IP-3	IT
OIL WELL (Test must be a Date First New Oil Run To Tank Length of Test Actual Prod. During Test GAS WELL Actual Prod. Test - MCF/D	Date of Test Tubing Pressur Oil - Bbls.	R ALLOV	WABLE	Producing Me Casing Pressu Water - Bbls. Bbls. Condens	vable for this depth sthod (Flow, pump, stre		Choke Size Gas - MCF Gravity of Conde	1 IP-3	IT
OIL WELL (Test must be Date First New Oil Run To Tank Length of Test Actual Prod. During Test GAS WELL	Date of Test Tubing Pressur Oil - Bbls.	R ALLOV	WABLE	Producing Me Casing Pressu Water - Bbls.	vable for this depth sthod (Flow, pump, stre		Choke Size Gas - MCF	1 IP-3	
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INSTRUCTION This form is to be filed in compliance with Rule 1104

Date

- 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.