Submit 5 Copies

Appropriate District Office
DISTRICT I

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

State of New Mexico

Energy ... inerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

RECEIVED

CEIACA

See Instructions

At Bottom of Page

Form C-104

Revised 1-1-89

PGT 1 9 1992

O. C. D.



REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Well API No.										
Operator MERIT ENERGY COMPANY					30-015-20023					
Address 12221 MERIT DRIVE, SUIT	E 500, DA	LLAS,	TEXAS 75251			·				
Reason(s) for Filing										
New Weli Recompletion	0.0 Dec Geo				PERFECTIVE OCTOPER 2 1902					
Change of Operator XX	ange of Operator XX Casinghead Gas Condensate				EFFECTIVE OCTOBER 2, 1992					
If change of operator give name and address of previous operator									Ī	
GREENHILL PETROLEUM	CORPOR	ATION,	16010 BARKER'S PO	INT LN,	SUITE 325,	HOUSTON	, TX 7/0/9			
II. DESCRIPTION OF WELL AND LEASE										
NORTH BENSON QUEEN				GRAYBURG, NORTH ST.				E-9262	E-9262	
Location	/K::: 52::0					D . D . T		WEST	west Line	
Unit Letter	ĸ	1980	Feet From The	SOUTH	Line and	1980	Feet From The	County EDDY		
	Fownship 18S		Range 30E	746	NMPM			County EDD:		
III. DESIGNATION OF TRA	ANSPORT	ER OF C	or Condensate	JAS	Address(Give ad	dress to which ap	proved copy of thi	s form is to be sent)		
Namer of Authorized Transporter of Oil XX or Condensate TEXACO TRADING & TRANSPORTATION					16825 N. CHASE BLVD, STE 600 HOUSTON, TX 77060					
Name of Authorized Transporter of Casin					Address (Give address to which approved copy of this form is to be sent)					
NONE	NONE							Is gas actually connected? When?		
If well produces oil or liquids, Unit			Unit	Sec. 28	Twp 18S	Rgc 30E	NO	V		
give location of tanks. If this production is commingled with that	from any other	r lesse or po	I ol. give commingling order numb	1	100	1302	1.10		<u></u>	
IV. COMPLETION DATA	i irom any ouz	o. po	, 6							
IV. COMPLETION DATA		Oil Well	Gas well	New Well	Workover	Doepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion	on - (X)									
Date Supdded Date Compl. Ready to Prod.				Total Depth		P.B.T.D.				
			Top Oil/Gas	Pay	Tubing Depth					
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation			ion	Top Ou/Oab Pay						
Perforations				.1			Depth Casing	Shoe		
TUBING, CASING AND CEMENTING I				RECORD			SACKS CEMENT			
HOLE SIZE	HOLE SIZE CASING & TUBING SIZE			DEPTH SET			P. + TO-3			
							18-23-92			
						che on				
								~/_		
V. TEST DATA AND REQ	UEST FO	R ALLO	WABLE							
		total volume	e of load oil and ust be qual to or	exceed top all	owable for this dep	th or be for full 2	4 hours.)	·		
Date First New Oil Run To Tank	Run To Tank Date of Test				Producing Method (Flow, pump, gas lift, etc.)					
Length of Test Tubing Pressure				Casing Pressure			Choke Size			
Length of Test Tubing Pressure										
Actual Prod. During Test Oil - Bbls.				Water - Bb	ls.		Gas - MCF			
				<u> </u>						
GAS WELL				T	-		I Carrier of Ca	- demosts		
Actual Prod. Test - MCF/D Length of Test				Bbls, Condensate/MMCF			Gravity of Condensate			
	Tubina Pasa	na (Shus-ia)		Casine Pres	Casing Pressure (Shut-in)			Choke Size		
Testing Method (pilot, back pr.) Tubing Pressure (Shut-in)										
VI. OPERATOR CERTIFIC	CATE OF	COMPL	IANCE							
I hereby certify that the rules and regulations of the Oil Consevation					OIL CONSERVATION DIVISION					
I hereby certify that the rules and regulations of the Oil Consevation Division have been complied with and that the information given above										
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.					Date Appr	oved		1 9 1992		
is true and complete to an over or my	g									
atterna I I lucalle					By ORIGINAL SIGNED BY					
Signiture					MIKE WILLIAMS					
SHERYL J. CARRUTH REGULATORY MGR.					Title SUPERVISOR, DISTRICT IF					
Printed Name				1						
10/08/92 (2	:14)701-83	77		ì						

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.