

ALBUQUERQUE, NEW MEXICO 87501
APPLICATION FOR WELLHEAD
PRICE CEILING CATEGORY DETERMINATION

1. FOR DIVISION USE ONLY:

DATE COMPLETE APPLICATION FILED _____

DATE DETERMINATION MADE _____

WAS APPLICATION CONTESTED? YES _____ NO _____

NAME(S) OF INTERVENOR(S), IF ANY: _____

RECEIVED

JAN 21 1983

O. C. D.
ARTESIA, OFFICE

5A. Indicate Type of Lease

STATE ☐

FEED ☒

5. State Oil & Gas Lease No. _____

7. Unit Agreement Name _____

8. Farm or Lease Name

Merri

9. Well No.

1

10. Field and Pool, or Wildcat

Wildcat Bone Sp

12. County

Eddy

2. Name of Operator

Ralph Nix

3. Address of Operator

P.O. Box 617, Artesia, New Mexico 88210

4. Location of Well

UNIT LETTER J LOCATED 1980 FEET FROM THE South LINE

AND 1980 FEET FROM THE East

LINE OF SEC. 34

TWP. 18-S RGE. 26-E NMPM

11. Name and Address of Purchaser(s)

Phillips Petroleum Company

WELL CATEGORY INFORMATION

Check appropriate box for category sought and information submitted.

1. Category(ies) Sought (By NGPA Section No.) 103

2. All Applications must contain:

☒ a. C-101 APPLICATION FOR PERMIT TO DRILL, DEEPEN OR PLUG BACK

☒ b. C-105 WELL COMPLETION OR RECOMPLETION REPORT

☐ c. DIRECTIONAL DRILLING SURVEY, IF REQUIRED UNDER RULE 111

☒ d. AFFIDAVITS OF MAILING OR DELIVERY

3. In addition to the above, all applications must contain the items required by the applicable rule of the Division's "Special Rules for Applications For Wellhead Price Ceiling Category Determinations" as follows:

A. NEW NATURAL GAS UNDER SEC. 102(c)(1)(B) (using 2.5 Mile or 1000 Feet Deeper Test)

☐ All items required by Rule 14(1) and/or Rule 14(2)

B. NEW NATURAL GAS UNDER SEC. 102(c)(1)(C) (new onshore reservoir)

☒ All items required by Rule 15

C. NEW ONSHORE PRODUCTION WELL

☐ All items required by Rule 16A or Rule 16B

D. DEEP, HIGH-COST NATURAL GAS, TIGHT FORMATION NATURAL GAS, AND PRODUCTION ENHANCEMENT NATURAL GAS

☐ All items required by Rule 17(1), Rule 17(2) or Rule 17(3), or Rule 17(4)

E. STRIPPER WELL NATURAL GAS

☐ All items required by Rule 18

I HEREBY CERTIFY THAT THE INFORMATION CONTAINED
HEREIN IS TRUE AND COMPLETE TO THE BEST OF MY
KNOWLEDGE AND BELIEF.

Ralph Nix

NAME OF APPLICANT (Type or Print)

SIGNATURE OF APPLICANT

Title Owner

Date January 14, 1983

FOR DIVISION USE ONLY

☐ Approved

☐ Disapproved

The information contained herein includes all
of the information required to be filed by the
applicant under Subpart B of Part 274 of the
FERC regulations.

EXAMINER

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

RECEIVED

DEC 16 1982

O. C. D.

ARTESIA, OFFICE

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	<input checked="" type="checkbox"/>
FILE	<input checked="" type="checkbox"/>
U.S.O.D.	<input checked="" type="checkbox"/>
LAND OFFICE	<input checked="" type="checkbox"/>
TRANSPORTER	<input checked="" type="checkbox"/>
OPERATOR	<input checked="" type="checkbox"/>
PROMOTION OFFICE	<input checked="" type="checkbox"/>

Operator Ralph Nix ✓

Address

P. O. Box 617 Artesia, New Mexico 88210

Reason(s) for filing (Check proper box)

New Well ☐
Recompletion ☐
Change in Ownership ☐

Change in Transporter of:

Oil ☐ Dry Gas ☐
Casinghead Gas ☐ Condensate ☐

Other (Please explain)

First Connection of Casinghead Gas

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Merri	1	Atoka Yeso	State, Federal or Fee Fee	
Location				
Unit Letter	J	1980 Feet From The South Line and 1980 Feet From The East		
Line of Section	34	Township 18S	Range 26E	NMPM, Eddy County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)						
Navajo Crude Oil Purchasing Co	P. O. Box 175 Artesia, NM 88210						
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)						
Phillips Petroleum	4 Home Savings & Loan, Bartlesville OK						
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When	
J	34	18S	26E		Yes	December 7, 1982	74004

If this production is commingled with that from any other lease or pool, give commingling order number:

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Rest.	Diff. Rest.
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations			Depth Casing Shoe					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual 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

CERTIFICATE OF COMPLIANCE

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.

Ralph Nix Jr
(Signature)

(Title)

(Date)

OIL CONSERVATION DIVISION

APPROVED DEC 22 1982, 19

Original Signed By

BY Leslie A. ClementsTITLE Supervisor District II

This form is to be filed in compliance with RULE 114.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation logs taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transportation or other such change of condition.

Separate Form C-104 must be filed for each pool in multiple.