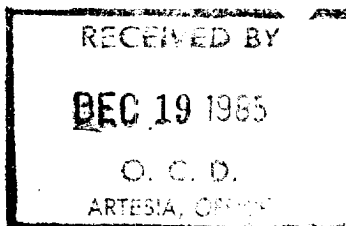


STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-78  
Format 06-01-83  
Page 1

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

**I.**

Operator  
RALPH NIX ✓

Address  
P. O. Box 440, Artesia, New Mexico 88210

Reason(s) for filing (Check proper box)

<input checked="" type="checkbox"/> New Well	Change in Transporter of:	Other (Please explain)  CASINGHEAD GAS MUST NOT BE FLARED AFTER <u>3-3-86</u> UNLESS AN EXCEPTION TO: RULE 1104 IS OBTAINED ✓
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	

If change of ownership give name and address of previous owner \_\_\_\_\_

**II. DESCRIPTION OF WELL AND LEASE**

Lease Name Merri Battery #2	Well No. 2	Pool Name, Including Formation Atoka, Glorieta/Yeso	Kind of Lease State, Federal or Fee	Lease No. ---
Location Unit Letter <u>I</u> ; <u>2280</u> Feet From The <u>South</u> Line and <u>840</u> Feet From The <u>East</u> Line of Section <u>34</u> Township <u>18 South</u> Range <u>26 East</u> , NMPM, Eddy County				

**III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS**

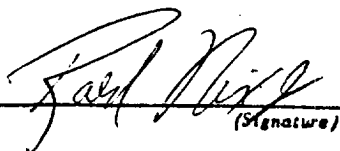
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Navajo Crude Oil Purchasing Co.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 175, Artesia, New Mexico 88210	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum Company	Address (Give address to which approved copy of this form is to be sent) Phillips Bldg., Bartlesville, OK 74004	
If well produces oil or liquids, give location of tanks.	Unit J	Sec. 34
	Twp. 18S	Rge. 26E
Is gas actually connected?	When no	

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

NOTE: Complete Parts IV and V on reverse side if necessary.

**VI. 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 is true and complete to the best of my knowledge and belief.

  
(Signature)

(Title)  
12-18-85

(Date)

OIL CONSERVATION DIVISION

APPROVED DEC 31 1985, 19 \_\_\_\_\_  
BY Original Signed By  
Les A. Clark  
TITLE Supervisor

This form is to be filed in compliance with RULE 1104.  
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 tests 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 transporter, or other such change of condition.  
Separate Forms C-104 must be filed for each pool in multiply completed wells.

# IV. COMPLETION DATA

Designate Type of Completion - (X)									
Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.		

Date Spudded	10-30-85	Date Compl. Ready to Prod.	12-13-85	Total Depth	4075' KB	P.B.T.D.	4015'
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Elevations (D.F., RKB, RT, CR, etc.)	3343' GR	Name of Producing Formation	Glarieta-Yeso	Top Oil/Gas Pay	2880'	Tubing Depth	3917'
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Perforations	20', .41" holes, 1 shot per 2', 3844-3882', 28', .42" holes 2880-3217'						
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## TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
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12 1/4"	8 5/8" 24#	1008' GL	550 SX CLTC
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7 7/8"	5 1/2" 15.5#	4055' GL	800 SX CLTC
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	2 7/8" 6.5#	3917' GL	
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## V. 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	12-13-85	Date of Test	12-17-85	Producing Method (Flow, pump, gas lift, etc.)	Pump
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Length of Test	24 hours	Tubing Pressure	20# psi	Casing Pressure	not tested
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Actual Prod. During Test	460	Oil-Bbls.	81	Water-Bbls.	400
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Gas-MCF	22 140	Gas-MCF	open	Choke Size	22 140
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## GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
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Testing Method (prior, back pr.)	Tubing Pressure (Shot-In)	Casing Pressure (Shot-In)	Choke Size
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