

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Budget Bureau No. 1004-0135
Expires August 31, 1985

421

SUNDRY NOTICES AND REPORTS ON RECEIVED

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		MAR 13 11 58 AM '91		5. LEASE DESIGNATION AND SERIAL NO. NM-17095	
2. NAME OF OPERATOR Merit Energy Company		CARLSBAD OFFICE AREA OFFICE		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 12221 Merit Drive, Suite 1040, Dallas, TX 75251				7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface Various Locations (See Attached List)				8. FARM OR LEASE NAME Government "D"	
				9. WELL NO. See Attached List #6	
				10. FIELD AND POOL, OR WILDCAT See Attached List	
				11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 1 & 12 T21S, R27E	
14. PERMIT NO.		15. ELEVATIONS (Show whether DF, RT, GR, etc.)		12. COUNTY OR PARISH Eddy	
				13. STATE New Mexico	

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	
(Other) Flare Gas <input checked="" type="checkbox"/>		(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.) *

Government "D" Lease, Well Nos. 1,3,6,9, & 15

Merit Energy Company, respectfully requests permission to flare gas from wells on the subject lease as further identified on the attached list.

Phillips 66 Natural Gas Company has advised that due to piping tie-ins and revisions they need to shutdown thier gastering system to the Aretesia Plant. The plant will be shut in by 6:00 am Tuesday, March 12, 1991 until 6:00 am Wednesday, March 13, 1991. Verbal approval was given on 3-8-91 by Dale Carpenter of the Carlsbad Office.

The flared volume will amount to a total of 80 MCF/D.

18. I hereby certify that the foregoing is true and correct

SIGNED *Dale Carpenter* TITLE Regulatory Manager DATE 3-8-91

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE 3-19-91

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side