	• _		1 and 1 an
mit 5 Copies ropnate District Office	State of Net Energy, Minerals and Natur	w Mexico ral Resources Department RI	CEIVED Form C-104 C)S Revised 1-1-89 See Instructions
TRICT 1 Box 1980, Hobbs, NM 88240	OIL CONSERVA' P.O. Bo	TION DIVISION	at Bottom of Page () CT 15 '90
TRICT II Drawer DD, Anesia, NM 88210	Santa Fe, New Me	xico 87504-2088	■ C. D.
TRICT III O Rio Brazos Rd., Aztec, NM 87410	REQUEST FOR ALLOWAB		CERTICE
	TO TRANSPORT OIL	AND NATURAL GAS	lell API Na
enior Merit Energy Company	\checkmark		
2221 Merit Drive, Si	uite 1040, Dallas, TX 75	251 Other (Please explain)	
ason(s) for Filing (Check proper bax) w Well	Change in Transporter of:		
completion 🔤	Oil Dry Gas		
ange in Operator	Casinghead Gas Condensate		
address of previous operator	eridian Oil Corporation		
DESCRIPTION OF WELL	Well No. Pool Name, Includin		Lease Lease No.
Sundance Federal	1 Sand Dune	Lower Penn, South	tale, Federal or Fee NM-031963
F	. 1980 Feet From The	lorth_Line and _1980	_ Feet From TheLine
Unit Letter		. NMPM.	Eddy County
Section 4 Towns	hip 24S Range 31E	, NMPM,	
I. DESIGNATION OF TRA	NSPORTER OF OIL AND NATU	RAL GAS Address (Give address to which appr	roved copy of this form is to be sent)
ame of Authorized Transporter of Oil			
ame of Authorized Transporter of Cas		Address (Give address to which app 1800 Wilco Bldg.,	roved copy of this form is to be sent) Midland, TX 79701
El Paso Natural Gas well produces oil or liquids,	Company Unit Sec. Twp. Rge.	Is gas actually connected?	When ?
e location of tanks.		Yes L	Unknown
this production is commingled with the V. COMPLETION DATA	as from any other lease or pool, give comming	New Well Workover Dee	pen Plug Back Same Res'v Diff Res'v
Designate Type of Completic	Oil Well Gas Well on - (X)		
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
levations (DF, RKB, RT, CR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Perforations			Depth Casing Shoe
enorations			
	TUBING, CASING AND CASING & TUBING SIZE	CEMENTING RECORD	SACKS CEMENT
HOLE SIZE	CASING & TODING OFFE		Post 50-3
			<u>10-12-90</u>
			- Charles
. TEST DATA AND REQU	JEST FOR ALLOWABLE		for this death on he for full 24 hours.)
DIL WELL (Test must be afi Date First New Oil Run To Tank	ter recovery of total volume of load oil and mus Date of Test	Producing Method (Flow, pump, ga	s lift, etc.)
			Choke Size
Length of Test	Tubing Pressure	Casing Pressure	
Actual Prod. During Test	Oil - Bbla.	Water - Bbls.	Gaa- MCF
GAS WELL			
Actual Prod. Test - MCF/D	Length of Test	Bbis. Condensais/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shus-in)	Choke Size
			<u></u>
I hereby certify that the rules and	FICATE OF COMPLIANCE		RVATION DIVISION
Division have been complied with is true and complete to the best of	and that the information given above	Date Approved	OCT 1 6 1990
$N = 0 \times 0$	Va Chi		
Signature	- Alexande		NAL SIGNED BY
Sheryl J. Carrutt Printed Name	h, Prod/Reg`Administrator	11	NUSOR, EUSTRICT M
10-10-90	(214) 701-8377		
Date	Telephone No.		

INSTRUCTIONS: 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 with Rule 111.

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

Fill out only Sections I, II, III, and VI for changes of operator, well name or number; transporter, or other such changes.
Separate Form C-104 must be filed for each pool in multiply completed wells.