STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

DISTRIBUTI				
BANTA FE				
FILE				
V.8.0.4.				
LAND OFFICE				
TRANSPORTER	OIL			
	GAS			
OPERATOR				
PRORATION OFFICE				

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 8750

REQUEST FOR ALLOWABLE AND

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

T PROPATION OFFICE	AUTHOR	IZATION TO T	RANSPO	RT OIL	UTAN DNA	RAL GAS	•		
Operator	<u>:</u>		·					*************************************	
Merrion Oil & Gas (Corporation	1							
Address									
P. O. Box 840, Farm	nington. Ne	w Mexico	87499						
Reason(s) for filing (Check proper bos				C	ther (Please	explain)		•	
New Well	Change tr	Transporter of:							
Recompletion	011		Dry C	as I					
Change in Ownership	. Casti	nghead Gas	Conde	ensate					
f change of ownership give name and address of previous owner			·····						-
II. DESCRIPTION OF WELL AN	ID LEASE								
Lease Name	Well No.	Pool Name, Incl	uding Form	ation		Kind of L			Lease No.
Pot Mesa	4	WC Mesave	rde			State, Fed	eral or Fee	Federal	NM 24964
Unit Letter C : 465	Feet Fro	m The North			780'		om The	West	County
III. DESIGNATION OF TRANS Name of Authorized Transporter of Ci The Mancos Corporation	PORTER OF	OIL AND NAT	P.	odress (C . O. Bo	ox 840,	Farming	ton, New	of this form is t	87499
Name of Authorized Transporter of Ca	ssinghead Gas	or Dry Gas (^^^	ddress (G	ive address t	o which ap	proved copy (of this form is t	o be sent)
If well produces oil or liquids, give location of lanks.	Unit Sec.	•	1	gas actu No	ally connecte)d? 	When As soon	n as possi	ble
If this production is commingled winner. NOTE: Complete Parts IV and				e commis	ngling order	number:	· 		<u>-</u>

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) Operations

(Title)

(Date)

OIL CONSERVATION DIVISION

APPROVED	1AN 1.5.1986
BY	Original Signed by FRANK T. CHAVEZ
TITLE	SUPERVISOR DISTRICT W 3

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 MULE 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, ell 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		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Restv.	Diff. Res'v.		
Designate Type of Completi	on — (X)	XX		XX	1	!	1	1	1 5		
Date Spudded	Date Com	pl. Ready to F	Prod.	Total Dept	h		P.B.T.D.	 	1		
10/29/85	12/27/	12/27/85			KB		3116' K	3116' KB			
Elevations (DF, RKB, RT, GR, etc.)	Name of P	roducing Form	nation	Top OII/Go	s Pay		Tubing Depth				
6858' KB, 6850' BL	Mesaver	rde		2147	'KB		2975' КВ				
Perforations 2920-28, 2PF; 2							Depth Castr	ng Shoe			
2PF; 2496-2501, 4PF; 2	474-78.	4PF: 243	32-29, 2PI	7: 2308-1	2, 4PF;	2168-70.	<u> </u>				
			CASING, AN	CEMENTI		- · · - · · · · · · · · · · · · · · · ·			-		
HOLE SIZE	CAS	ING & TUBI	NG SIZE	<u> </u>	DEPTH SE	T	- 	CKS CEMEN			
·12-1/4	8-5/8"	, 23 #/ft	J-55	<u> </u>	88'		80 sx (94.4 cu. ft.)				
7-7/8"	5-1/2"	, 14 #/ft	J-55	31	<u>.77'</u>		460 sx (737.6 cu	ft_)		
	<u> </u>										
	12-7/8"			j 29	75' KB		1				
. TEST DATA AND REQUEST OIL WELL	FOR ALL) ALBAWC	Test must be a able for this de	fter recovery	of total volum full 26 hours	ne of load oil	and must be e	qual to or exc	red top allow		
Date First New Oil Run To Tanks	Date of Te	PAL		Producing I	dethod (Flow,	pump, zas lij	(i, eic.)				
1/7/86	1/14/	/86		Pu	mping	ing					
ength of Test	Tubing Pro	osawe		Casing Pre	osw•	•	Choke Size				
24 hour	80	כ		80			3/4				
Actual Prod. During Test	Oil-Bbis.			Water - Bble	•		Gas - MCF				
	1	17		<u> </u>	15		177				
AS WELL											
Actual Prod. Test-MCF/D	Length of	Test		Bbls. Cond	enegte/MMCF		Gravity of C	ondensate			
Teeting Mothod (pilot, back pr.)	Tubing Pre	esawe (Shut-	-in)	Casing Pre	eswe (spat-	in)	Choke Size				

IV. COMPLETION DATA