

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

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

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

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SEP 30 1986

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS **OIL CON. DIV. DIST. 3**

**I.**

Operator  
Merrion Oil & Gas Corporation

Address  
P. O. Box 840, Farmington, New Mexico 87499

Reason(s) for filing (Check proper box)

<input checked="" type="checkbox"/> New Well	Change in Transporter of:
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas
	<input type="checkbox"/> Dry Gas
	<input type="checkbox"/> Condensate

Other (Please explain)

If change of ownership give name and address of previous owner

**II. DESCRIPTION OF WELL AND LEASE**

Lease Name Corrales	Well No. 2	Pool Name, including Formation Franciscan Lake Mesaverde	Kind of Lease State, Federal or Fee Federal	Lease No. NM 53926
Location				
Unit Letter <u>N</u> : <u>465</u> Feet From The <u>South</u> Line and : <u>2300</u> Feet From The <u>West</u>				
Line of Section <u>3</u> Township <u>20N</u> Range <u>6W</u> , NMPM, <u>McKinley</u> 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"/> The Mancos Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1320, Farmington, New Mexico 87499
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit : <u>N</u> Sec. : <u>3</u> Twp. : <u>20N</u> Rge. : <u>6W</u>
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.

*T. Gregory Merrion*  
(Signature)

T. Gregory Merrion Production Engineer  
(Title)

8/7/85  
(Date)

OIL CONSERVATION DIVISION

APPROVED

SEP 30 1986

BY

Original Signed by FRANK T. CHAVEZ

TITLE

SUPERVISOR DISTRICT

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.
		XX		XX					
Date Spudded 1/13/86	Date Compl. Ready to Prod. 4/3/86	Total Depth 3217' KB				P.B.T.D. 3174' KB			
Elevations (DF, RKB, RT, CR, etc.) 6909' KB, 6901' GL	Name of Producing Formation Mesaverde		Top Oil/Gas Pay 2186' KB			Tubing Depth 2737' KB			
Perforations 2723, 2718, 2652, 2648, 2627, 2621, 2565, 2559, 2542, 2476, 2470, 2452, 2450, 2352, 2347, 2242, 2233, 2204, 2189, 2186, 20 holes						Depth Casing Shoe 3217' KB			
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"		23 #/ft., J-55 8 5/8		128' KB		90 sx Class B (106.2 cu.			
7-1/8"		14 #/ft., J-55 5 1/2		3217' KB		200 sx Class B (412 cu.			
2-7/8"				2737' KB		Add tail in = 687 cu. ft.			

#### V. TEST DATA AND REQUEST FOR ALLOWABLE (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 4/5/86	Date of Test 4/5/86	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hours	Tubing Pressure 550	Casing Pressure 600	Choke Size 3/4
Actual Prod. During Test	Oil-Bbls. 40	Water-Bbls. 224	Gas-MCF 603

#### AS 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