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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

Operator J. Gregory Merrion & Robert L. Bayless	
Address P. O. Box 507, Farmington, New Mexico 87401	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input checked="" type="checkbox"/>	Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name and address of previous owner _____

I. DESCRIPTION OF WELL AND LEASE		Lease No.
Lease Name Canyon Largo Unit	Well No. 122	Pool Name, including Formation Devils Fork Mesaverde
Kind of Lease State, Federal or Fee Federal		SE 078877
Location Unit Letter 0 ; 790 Feet From The south Line and 1650 Feet From The east		
Line of Section 8 Township 24N Range 6W, NMPM, Rio Arriba County		

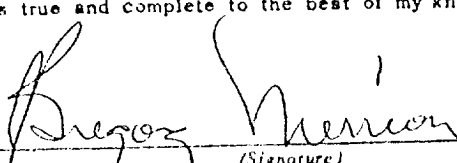
II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS		Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Permian Corporation		
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	El Paso Natural Gas Company		
If well produces oil or liquids, give location of tanks.	Unit P Sec. 8 Twp. 24 Rge. 6	Is gas actually connected? yes	When 1962

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

V. COMPLETION DATA		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Designate Type of Completion - (X)		X							
Date Spudded	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.					
	5-25-75	5575		4700					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay		Tubing Depth					
6506 KB	Mesaverde	4270		4700					
Perforations				Depth Casing Shoe					
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
11"	8 5/8"		178		172				
7 7/8"	4 1/2"		5570		250				

VI. 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 5-28-75	Date of Test 5-25-75	Producing Method (Flow, pump, gas lift, etc.) pump	
Length of Test 24 hours	Tubing Pressure 30	Casing Pressure 30	Choke Size -
Actual Prod. During Test	Oil-Bbls. 52	Water-Bbls. 0	Gas-MCF -

GAS WELL		Request test allowable of 2000 bbls.	
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VII. CERTIFICATE OF COMPLIANCE	
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.	
 (Signature)	
Co-owner (Title)	
June 2, 1975 (Date)	

OIL CONSERVATION COMMISSION	
APPROVED JUN 3 1975	
BY Original Signed by Emery C. Arnold	
SUPERVISOR DIST. #3	
TITLE _____	
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.	