

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

Form C-104
Revised 10-1-78

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

311010

RECEIVED

NOV 23 1983

OIL CON. DIV.
DIST 3

I.

Operator Merrion Oil & Gas Corporation	
Address P. O. Box 1017, Farmington, New Mexico 87499	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	
If change of ownership give name and address of previous owner	

II. DESCRIPTION OF WELL AND LEASE

Lease Name Canyon Largo Unit	Well No. 306	Pool Name, including Formation Devils Fork Gallup	Kind of Lease State, Federal or Fee	Lease No. Federal SF 078877
Location				
Unit Letter K	1850	Feet From The South	2150	Feet From The West
Line of Section 11	Township 24N	Range 6W	Rio Arriba	
NMPM, 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"/> Permian Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1702, Farmington, New Mexico 87499	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Natural Gas Co.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 4990, Farmington, New Mexico 87499	
If well produces oil or liquids, give location of tanks.	Unit K	Sec. 11
	Twp. 24N	Rge. 6W
Is gas actually connected?	When As soon as possible	
No		

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well XX	Gas Well	New Well XX	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'
Date Spudded 9/25/83	Date Compl. Ready to Prod. 11/19/83	Total Depth 5704' KB		P.B.T.D. 5654' KB				
Elevations (DF, RKB, RT, GR, etc.) 6409' GL, 6422' KB	Name of Producing Formation Gallup	Top Oil/Gas Pay 5346' KB		Tubing Depth 5368' KB				
Perforations 5546 - 66' KB, 11 holes, 5585 - 86' KB, 2 holes, 5609 - 10' KB, 2 holes, 5346, 5356, 5358, 5373, 5375, 5377, 5409, 5411, 5413, 5427, 5429,				Depth Casing Shoe				
TUBING, CASING, AND CEMENTING RECORD 5431, 5433, 5435, 5444, 15 holes								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT				
12-1/4"	8-5/8"	213' KB		175 sx (361 cu. ft.)				
7-7/8"	4-1/2"	5704' KB		225 sx (274.5 cu. ft.)				
				700 sx (1442 cu. ft.)				
	2-3/8"	5368' KB		100 sx (122 cu. ft.)				

V. 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 11/19/83	Date of Test 11/19/83	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hour	Tubing Pressure 125	Casing Pressure 300	Choke Size 3/4"
Actual Prod. During Test	Oil-Bbls. 88	Water-Bbls. -0-	Gas-MCF 415

GAS 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

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 above is true and complete to the best of my knowledge and belief.

OIL CONSERVATION DIVISION

APPROVED NOV 23 1983

BY Original Signed by FRANK T. CHAVEZ

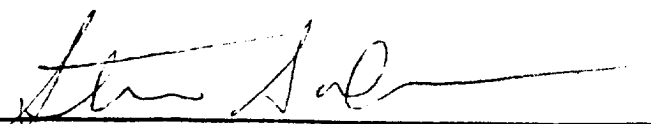
TITLE SUPERVISOR DISTRICT # 3

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 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 changes of conditions.


(Signature)
Steve S. Dunn, Operations Manager
(Title)
11/21/83
(Date)