

SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

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

Form C-104
Supersedes Old C-104 and
Effective 1-1-85

3/36/82-1
3003/82

Operator
Merrion Oil & Gas Corporation
Address
P. O. Box 1017, Farmington, New Mexico 87499

Reason(s) for filing (Check proper box)

New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

Other (Please explain)
OIL CON. COM.
DIST. 3

If change of ownership give name
and address of previous owner

OIL CONSERVATION COM.
SANTA FE

I. DESCRIPTION OF WELL AND LEASE

Lessee Name Canyon Largo Unit	Well No. 315	Pool Name, including Formation Devils Fork Gallup	Kind of Lease State, Federal or Fee Federal SF	Lease No. 079071 I
Location Unit Letter <u>F</u> : <u>1770</u> Feet From The <u>North</u> Line and <u>1740</u> Feet From The <u>West</u> Line of Section <u>28</u> Township <u>25N</u> Range <u>6W</u> , NMPM, <u>Rio Arriba</u> County				

I. 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 990, Farmington, New Mexico 87499					
If well produces oil or liquids, give location of tanks.	Unit F	Sec. 28	Twp. 25N	Rge. 6W	Is gas actually connected? No	When As soon as possible

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

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 10/25/82	Date Compl. Ready to Prod. 12/9/82	Total Depth 6437' KB		P.B.T.D. 6407' KB					
Elevations (DF, RKB, RT, GR, etc.) 6741' KB, 6728' GL	Name of Producing Formation Gallup		Top Oil/Gas Pay 6013' KB		Tubing Depth 5995' KB				
Perforations 6013 - 6136, 23 holes, 6165 - 6199', 28 holes					Depth Casing Shoe 6456' KB				
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE 12-1/4"	CASING & TUBING SIZE 8-5/8"		DEPTH SET 204' KB		SACKS CEMENT 170 SX				
7-7/8"	4-1/2"		6456' KB		225 SX Class H				
	2-3/8"		5995'		800 SX Class B				
					100 SX Class H				

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 12/5/82	Date of Test 12/8/82	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 16.5 hours	Tubing Pressure 75 PSIG	Casing Pressure 250 PSIG	Choke Size 3/4"
Actual Prod. During Test	Oil - Bbls. 225 Bbls/day	Water - Bbls. -0-	Gas - MCF 230 MCF/Day

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 Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Steve S. Dunn, Operations Manager

12/9/82

OIL CONSERVATION COMMISSION

APPROVED DEC 10 1982

BY
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 multiple