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Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II P.O. Drawer DD, Anesia, NM 88210 State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

| Oberator | | | | | | | | II API No. | | | |
|---|--------------------------------|------------------------|--|---------------------------|---|-------------------|--------------------------------------|--------------------------------------|-------------------|--------------|--|
| MERRION OIL & GAS CORPORATION | | | | | | | | | | | |
| Address | | | | | | | | | | | |
| P. O. Box 840, Farming | ton, Ne | ew Mexi | СО | | | | | | | | |
| Reason(s) for Filing (Check proper box) | Oil | Other (Please explain) | | | | | | | | | |
| New Well | | Change in | - | 1 | | | | | | ļ | |
| Recompletion | Oil | | Dry G | .—. | | | | | | | |
| Change in Operator [_] | Casinghea | d Gas | Conder | nsate [] | | | | | | | |
| If change of operator give name and address of previous operator | | | | | | | | | | | |
| | | . 0.17 | | | | | | | | | |
| II. DESCRIPTION OF WELL AND LEASE | | | | | | | | | | | |
| Lease Name | Well No. | 1 | | ing Formation | | | Kind of Lease Rook, Federal ox From | | case No. | | |
| Canyon Largo Unit | 315 | J0 | evils r | ork Gallup | | | SF-079071 | | | | |
| | 177 | 7.0 | | | Noveh | 1740 | 1 | | Woot | | |
| Unit Letter F | _ : <u>177</u> | | Feet Fr | om The | NOI CIT'I | ne and | | Feet From The | West | Line | |
| Section 28 Township 25N Range 6W | | | | | ,NMPM, Rio Arriba County | | | | | County | |
| | <u>''</u> | | 44.1.4 | | | | 110 1111 | 1100 | **** | County | |
| III. DESIGNATION OF TRAN | SPORTE | R OF O | IL AN | D NATU | RAL GAS | | | | | | |
| Name of Authorized Transporter of Oil | [X] | or Conden | sate | [] | Address (Give ackiress to which approved copy of this form is to be sent) | | | | | | |
| Meridian Oil, Inc. | | | | | P. O. Box 4289, Farmington, N.M. 87499 | | | | | | |
| Name of Authorized Transporter of Casinghead Gas [X] or Diy Gas | | | | | Address (Give address to which approved copy of this form is to be sent) | | | | | | |
| El Paso Natural Gas Co. | | | | | P. O. Box 4990, Farmington, N.M. 87499 | | | | | | |
| If well produces oil or figuids, give location of tanks. | Unit | | | | is gas actuall Yes | ly connected? | [Wh | en 7 | | | |
| · · · · · · · · · · · · · · · · · · · | <u>F</u> | 28 | 25N | 6W | J | | | 3/83 | 3 | | |
| f this production is commingled with that I IV. COMPLETION DATA | rom any oo | er tease or j | poor, grv | e commingi | ועג פוחפג עמווו | ber: | | | | | |
| TY. COMPERTION DATA | | loit well | | Cas Well | New Well | Workover | Deepen | Plug Back Sa | | 1 N. (C. P) | |
| Designate Type of Completion | - (X) | 1 | 1 | 248 TT | 1 | Workover | 1 Deelen | 1 Ling pack 127 | THE KELV | Diff Res'v | |
| Date Spudded | Date Comp | ol. Ready to | 1 Prod. | | Total Depth | . | J | ll | | | |
| • | , | , | | | | | | 7.3 | | ŀ | |
| Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation | | | | | Τορ Οίν Gas Pay | | | Tubing Depth | Tubing Depth | | |
| | | | | | | | | | | | |
| Perforations | | | | | | | | Depth Casing S | Depth Casing Shoe | | |
| | | | | | | | | | | | |
| TUBING, CASING AND | | | | | CEMENTING RECORD | | | | | | |
| HOLE SIZE | HOLE SIZE CASING & TUBING SIZE | | | | DEPTH SET | | | SAC | SACKS CEMENT | | |
| | | | | |] | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| 7 - 2015 (2015) 2015 - 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | T COD A | T. C. C. U. | DI E | | | | | | | | |
| V. TEST DATA AND REQUES | | | | | | | | Part at a karra | C 11 2 4 1 | 1 | |
| OIL WELL (Test must be after re Date First New Oil Run To Tank | Date of Tes | | 9) 1034 0 | ni ani musi | , | ethod (Flow, pu | | · | 14 700 | 3.7 | |
| Date First New Oil Rull To Falls | Date of Tes | × | | | 1 rosaemę un | caroo (1 1011, p. | <i>2.11</i> ₽1, g∞ 191. | | | ļ | |
| Length of Test | st Tubing Pressure | | | | Casing Pressu | ıre | | Choke Size | Choke Size | | |
| Daniel of the | ruomg rre. | | | | Calling / Ites.ore | | | | | | |
| Actual Prod. During Test | Oil - IJbls. | | | | Water - Bbls. | | | GAD FELE VE | | | |
| • | | | | | | | | | IK - | | |
| CACAVELL | L | | | | | | | uu c | D9 7 1 | 090 | |
| GAS WELL Actual Prod. Test - MCF/D [Length of Test | | | | | Bbls. Conden | sute/MMCF | | FEB 2 7 1989 [Gravity of Condensate | | | |
| Actual Front Fost - Michie | Exiligit of 1 | 1000 | | | Bols. Condensate/Mivies | | | OIL CON | | | |
| esting Method (pitot, back pr.) | saire (Shut-in) | | | Casing Pressure (Shut-in) | | | Choke Size To Tay Town | | | | |
| coming interior (years) occur years | | | | | _ | | | | \$ 3* " | | |
| AT ODED ATOD CEDITIES. | V.L.C. \\ C.C. | COMP | [[] | CE | | | | | | | |
| VI. OPERATOR CERTIFICATE OF COMPLIANCE | | | | | OIL CONSERVATION DIVISION | | | | | | |
| Thereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above | | | | | | | | | | | |
| is true and Appropriete to the best of my knowledge and belief. | | | | | Data Approved FFD 07 4000 | | | | | | |
| X N 0 0 | | | | | Date ApprovedFEB 27 1989 | | | | | | |
| Atum 1 human | | | | | D | | 7 | | / | | |
| Steven S. Dunn, Operations Manager | | | | | By 3.1. d. | | | | | | |
| Printed Name Title | | | | | Title | | SUPER | RVISION DIS | STRICT | # 3 | |
| 2/24/89 505-327-9801 | | | | | | | | | | | |
| Dute | | | phone N | o. | | | | | | | |
| | | 1000 B 1000 B | - C. | COCK TO THE OWN | CONTRACTOR OF THE PARTY OF THE | | THE PERSON OF | | TINE KUONE | | |

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.