Appropriate District Office

1STRICT 1

20. Box 1980, Hobbs, NM 88240

DISTRICT II 2.O. Drawer DD, Artesia, NM 88210

State of New Mexico Energy, ... inerals and Natural Resources Department

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

## OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

AUG 23 '90

| DISTRICT III<br>1000 Rio Brazos Rd., Aztec, NM 87410   | DEOL                                    |                     |                | •             | I F AND A  |                       | ATION       | <b>ن</b> . (. (   | D.                               |                |  |
|--|---|---------------------|----------------|---------------|--|-----------------------|-------------|-------------------|----------------------------------|----------------|--|
| OOO Rio Brazos Rd., Aztec, NM 87410 REQUEST FOR ALLOWABI<br>TO TRANSPORT OIL   |   |                     |                |               |  | URAL GA               | S           | ARTESIA O         | FFICE                            |                |  |
| Operator   |   |                     |                |               |  |                       |             | API No.           | 005- 61398                       |                |  |
| Merit Energy Company Address   |   |                     |                |               |  |                       | 1 30        | -005- 015         | 130                              |                |  |
| 12221 Merit Drive, Sui   | te 104                                  | 0, Dal              | las,           | TX 752        | 251<br>Other   | r (Please expla       | in)         |                   |                                  |                |  |
| Reason(s) for Filing (Check proper box) New Well   |   | Change in           | Transpo        | orter of:     |  | i (i toaso arpra-     | 7           |                   |                                  |                |  |
| Recompletion   | Oil                                     |                     | Dry Ga         |               |  |                       |             |                   |                                  |                |  |
| Change in Operator   | Casinghea                               | id Gas 🗌            | Conde          | asate 🗌       |  |                       |             |                   | ·                                |                |  |
| • •  |   |                     | rpora          | tion, 8       | 350 Unit   | ed Bank P             | Plaza,D     |                   | , Roswell,                       | <u>NM</u> 8820 |  |
| I. DESCRIPTION OF WELL. Lease Name   | AND LE                                  | Well No.            | Pool N         | ame, Includi  | ng Formation   | <u></u>               | Kind        | of Lease          | Lease N                          | 0.             |  |
| PZ Federal   |   | 2                   |                | •             | e Abo,So   | outh                  | State       | Federal or Fee    | NM-14294                         |                |  |
| Location   |   |                     |                |               |  |                       |             |                   |                                  |                |  |
| Unit LetterB   | _ :1 <u>9</u>                           | 980                 | Feet F         | rom The       | ast Line   | and <u>660</u>        | · F         | Feet From The _   | North                            | Line           |  |
| Section 7 Township   | <u>98</u>                               |                     | Range          | 26E           | , N  | ирм,                  | Chav        | es                | Co                               | unty           |  |
| (II. DESIGNATION OF TRAN   | SPORTE                                  | ER OF O             | IL AN          | D NATU        | RAL GAS  |                       |             |                   |                                  | <del></del>    |  |
| Name of Authorized Transporter of Oil  |   |                     |                |               |  |                       |             |                   | rm is to be sent)                |                |  |
| Pride Pipeline   |   | Gas or Dry Gas [XX] |                |               | P. O. Box 2436, Abilen Address (Give address to which approved |                       |             | elle, IX          | conv of this form is to be sent) |                |  |
| Name of Authorized Transporter of Casing   |   |                     | or Dry         | Jas [XX]      |  |                       |             |                   | 7251-1188                        |                |  |
| Transwestern Pipeline If well produces oil or liquids,   | Unit                                    | Sec.                | Twp.           | Rge.          | Is gas actually  |                       | Whe         | n ?               |                                  |                |  |
| give location of tanks.  | <u>i</u>                                | İ                   | <u> </u>       |               | Yes_   |                       | L_          | 8/1989            |                                  |                |  |
| If this production is commingled with that IV. COMPLETION DATA   | from any oth                            | her lease or        | pool, gi       | ve commingl   | ing order num  | per:                  |             | · -,              |                                  |                |  |
|  |   | Oil Well            | 1              | Gas Well      | New Well   | Workover              | Deepen      | Plug Back         | Same Res'v Diff                  | Res'v          |  |
| Designate Type of Completion   |   | pl. Ready to        | a Brad         |               | Total Depth  |                       | <u> </u>    | P.B.T.D.          | L                                |                |  |
| Date Spudded   | Date Com                                | ipi. Keady u        | o Piou.        |               | Total Dopan  |                       |             | 1.5.1.5.          |                                  |                |  |
| Elevations (DF, RKB, RT, GR, etc.)   | Name of Producing Formation             |                     |                |               | Top Oil/Gas Pay  |                       |             | Tubing Dept       | Tubing Depth                     |                |  |
| Perforations   | l                                       | ·                   |                |               |  |                       |             | Depth Casin       | g Shoe                           |                |  |
| <u></u>  |   | TIDING              | CASI           | NG AND        | CEMENTI  | NG RECOR              | D           |                   |                                  |                |  |
| HOLE SIZE  | TUBING, CASING AND CASING & TUBING SIZE |                     |                |               | CENTERVIN  | DEPTH SET             |             |                   | SACKS CEMENT                     |                |  |
| , , oct out  |   |                     |                |               |  |                       |             |                   |                                  |                |  |
|  |   |                     |                |               |  |                       |             |                   |                                  |                |  |
|  |   |                     |                |               |  | <u> </u>              |             |                   |                                  |                |  |
| V. TEST DATA AND REQUES  | T FOR                                   | ALLOW               | ABLE           | ,             | <u> </u>   |                       |             |                   |                                  |                |  |
| OIL WELL (Test must be after r   | ecovery of t                            | total volume        | of load        | oil and must  | be equal to or   | exceed top allo       | wable for 1 | his depth or be j | for full 24 hours.)              |                |  |
| Date First New Oil Run To Tank   | Date of Te                              | est                 |                |               | Producing M  | ethod (Flow, pu       | mp, gas iyi | , eic.j           | parted                           | ID-            |  |
| Length of Test   | Tubing Pressure                         |                     |                |               | Casing Press   | ure                   |             | Choke Size        | Choke Size 8 - 31-90             |                |  |
| Actual Prod. During Test   | Oil - Bbls.                             |                     |                | Water - Bbls. |  |                       | Gas- MCF    | Gas-MCF GAGOP     |                                  |                |  |
| GAS WELL   | .1                                      |                     |                |               | J  |                       |             |                   |                                  |                |  |
| Actual Prod. Test - MCF/D  | Length of Test                          |                     |                |               | Bbls. Condensate/MMCF  |                       |             | Gravity of C      | Gravity of Condensate            |                |  |
| Cesting Method (pitot, back pr.)   | Tubing Pressure (Shut-in)               |                     |                |               | Casing Pressure (Shut-in)                                      |                       |             | Choke Size        | Choke Size                       |                |  |
| VI. OPERATOR CERTIFIC  | <u> </u>                                | E COM               | DI IV.         | NCF           | 1  |                       |             |                   | D.V. (1.0.1.0.1.1.1              |                |  |
|  |   |                     |                | . 102         |  | OIL CON               | ISER\       | VATION            | DIVISION                         |                |  |
| 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. |   |                     |                |               | Date ApprovedAUG 3 1 1990                                      |                       |             |                   |                                  |                |  |
|  | _                                       | _                   | A              | A             |  | • •                   |             |                   |                                  |                |  |
| Cotractal / Gurante  |   |                     |                |               |  | By CRIGINAL SIGNED BY |             |                   |                                  |                |  |
| Sheryl J. Carruth Prod/Reg. Admin.   |   |                     |                |               | MIKE WILLIAMS Title SUPERVISOR, DISTRICT IT                    |                       |             |                   |                                  |                |  |
| Printed Name   | (0)                                     | 1/1 704             | Title<br>1-837 | 7             | Title  | SUPE                  | HVISUR      | , DISTRICT        | 11                               |                |  |
| 8-20-90<br>Date  | 14                                      |                     | lephone        |               |  |                       |             |                   |                                  |                |  |

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.