Form 3160-5 (June 1990)

UNITED STATES DEPARTMENT OF THE INTERIOR

FORM APPROVED Budget Bureau No. 1004-0135 Expires: March 31, 1993

5. Lease Designation and Serial No. MM 12687

6. If Indian, Allottee or Tribe Name

BUREAU OF LAND MANAGEMENT SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to deepen or reentry to a different reservoir. Use "APPLICATION FOR PERMIT—" for such proportals

Use "APPLICATION FO	DH PEHMIT — Tor succeeding the sales	NMNM72647	
SUBMI	T IN TRIPLICATE ADD 2 (100	7. If Unit or CA, Agreement Designation	
1. Type of Well Oil Well Well Well (ther	5. C. S.	8. Well Name and No. JJ FED COM #2	
MERIT ENERGY COMP ANY 3. Address and Telephone No.		9. API Well No.	
12221 MERIT DRIVE, SUITE 500, DALLAS, TEXAS (214)701-8377 4 Location of Well (Footage, Sec., T., R., M., or Survey Description) NESW - / - 105 - 25E		10. Field and Pool, or Exploratory Area PECOS SLOPE ABO, SOUTH 11. County or Parish, State	
1855 FBL E	1650 FWD	Chaver	
CHECK APPF OPRIATE BOX	((s) TO INDICATE NATURE OF NOTICE, REF	PORT, OR OTHER DATA	
TYPE OF SUBM SSION	TYPE OF ACTIO	ON	
Notice of Intent Subsequent Rept 1	Abandonment Recompletion Plugging Back Casing Repair	Change of Plans New Construction Non-Routine Fracturing Water Shut-Off	
Final Abandonm nt Notice	Altering Casing Other WATER DISPOSAL	Conversion to Injection Dispose Water (Note: Report results of multiple completion on Well	

Completion or Recompletion Report and Log form.) 13 Describe Proposed or Completed Derations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations an measured and true vertical depths for all markers and zones pertinent to this work.)*

MERIT ENERGY FEREBY SEEKS APPROVAL OF ITS WATER DISPOSAL METHOD FOR THIS WELL.

OWNER NAME: 1 OCO HILLS WATER DISPOSAL DISPOSAL NAME: LOCO HILLS WATER DISPOSAL

LEGALS: SEC. 16 T17S R30E, EDDY COUNTY, NEW MEXICO

PERMIT NO: R-3221

METHOD: INJE FION Evaporative pit.



I hereby certify that the foregoir g is true and correct	.=	A PRODU	
Signed None	Title REGULA	IURY MANAGER	04-14-93
(This space for Federal or State office use)		" StieSre	in .
Approved by	Title	APR 1 9 199	
		knowingly and willfully to make to any department or agency of the Uniferi States any false; fictitious or fraudu	