Submit'l Copy To Appropriate District	State of New Mexico	Form C-103
Office District I – (575) 393-6161 1625 N. French Dr., Hobbs, NM 8824 (HOBBS OF B) District II – (575) 748-1283	gy, Minerals and Natural Resources	Revised August 1, 2011
1625 N. French Dr., Hobbs, NM 88240 (CDB)		WELL API NO. 30-025-10722
Oll	CONSERVATION DIVISION	5. Indicate Type of Lease
District III - (505) 334-6178 APR 19 2011	1220 South St. Francis Dr.	STATE X FEE
811 S. First St., Artesia, NM 88210 <u>District III</u> – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> – (505) 476-3460	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM RECEIVED		
87505 SUNDRY NOTICES AND		7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOSALS TO DR		State A A/C 1
DIFFERENT RESERVOIR. USE "APPLICATION FOR		
PROPOSALS.) 1. Type of Well: Oil Well Gas Well	X Other	8. Well Number 90
2. Name of Operator	Z Other	9. OGRID Number
Name of Operator Merit Energy Company		14591
3. Address of Operator 13727 Noel Road, Ste.	500	10. Pool name or Wildcat
Dallas, TX 75240		JalmatTanYates7-Rivers/Eunice7RiversQueenSo
4. Well Location		
Unit Letter A : 660	feet from the North line and 99	0 feet from the East line
Section 15	Township 22S Range 36E	NMPM County Lea
	ation (Show whether DR, RKB, RT, GR, etc.	
144		2265
12. Check Appropria	te Box to Indicate Nature of Notice	, Report or Other Data
NOTICE OF INTENTIO	N.TO.	DOCUMENT DEPORT OF
NOTICE OF INTENTIO		BSEQUENT REPORT OF: rk □ altering casing □
<u>=</u>	=	RILLING OPNS. P AND A
TEMPORARILY ABANDON CHANGE		_
	LE COMPL CASING/CEMEN	11 30B
DOWNHOLE COMMINGLE		
OTHER:	☐ OTHER:	
13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date		
of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of		
proposed completion or recompletion.		
Plan to drill out CIBP and commingle well.		
7 tall vo 41 to 6 to		
Spud Date:	Rig Release Date:	
•		
I hereby certify that the information above is tru	ue and complete to the best of my knowled	lge and belief.
eloh to		
SIGNATURE CAN ON THE SIGNATURE	TITLE Regulatory Analyst	DATE 04/17/2012
'	P 11 11	PHONE (050) (05
Type or print name Matt Ogden	E-mail address: matt.ogden@m	eritenergy.com PHONE: (972)628-1603
For State Use Only	_	. /
APPROVED BY:	TITLE STANT IN	GZ DATE 4-19-20/2
Conditions of Approval (Lany):		
7,		APR 1 9 2012
		APR 1 9 2012

APR 1 9 2012