Submit 1 Copy To Appropriate District	O CN.	<i>x</i> •	F 0.102
Office	Francis Misses 1 Notation 1 December 2		Form C-103 Revised August 1, 2011
<u>District I</u> – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240	Energy, witherars and Na	nutai Kesources	WELL API NO.
<u>District II</u> – (575) 748-1283 811 S. First St., Artesia, NM 88210	OIL CONSERVATIO	N DIVISION	30-025-34672  5. Indicate Type of Lease /
<u>District III</u> – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Fr		STATE X FEE
<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 87505			
	FICES AND REPORTS ON WELL		7. Lease Name or Unit Agreement Name State A A/C 2
DIFFERENT RESERVOIR. USE "APPL	OSALS TO DRILL OR TO DEEPEN OR I LICATION FOR PERMIT" (FORM C-101)	FOR SUGHE OCD	State A A/C 2
PROPOSALS.)  1. Type of Well: Oil Well	Gas Well X Other WIW		8. Well Number 76
2. Name of Operator		SEP 0 5 2014	9. OGRID Number
Merit Energ	• •	JL1 •	14591 10. Pool name or Wildcat
3. Address of Operator 13727 No Dallas, Te	el Rd. Suite 1200 exas 75240	RECEIVED	
4. Well Location		NLO-	Jalmat, Tan-Yates, 7 Rvrs (pro gas)
Unit Letter E	: 1980 feet from the North	line and 660	feet from the West line
Section 8	Township 22S	Range 36E	NMPM County Lea
	11. Elevation (Show whether L	OR, RKB, RT, GR, etc.,	
and a			
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
SUBSEQUENT REPORT OF:			
P E-PERMITTING	Ì	REMEDIAL WOR	
P&A NR	P&A R	COMMENCE DRI	
P INT TO P&A CASING/CEMENT JOB			
D CSNG CHG Loc			
o TA PM RBD	MS CHART	OTHER: Ran MIT	T; Request TA Status
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.			
08/21/2014 Ran MIT Test.			
Merit Energy is requesting TA status for 3 years. Spoke w/Maxey Brown 07/07/2014 concerning waterflood study. To date, 4 wells have been returned to injection.			
ans Approval of Temporary , I am a second se			
Abandonment Expires 8/21/2017			
31100 1			
year 3			
Spud Date:	Rig Release	Date:	
opud Date.	Kig Kelease		
I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
	1		
SIGNATURE Lique	TITLE Reg	ulatory Manager	DATE <u>09/03/2014</u>
Type or print name Lynne Moon	E-mail addr	ess: lvnne.moon@me	eritenergy.com PHONE: (972)628-1569
For State Use Only			
APPROVED BY: Wales Dist. Supervisor DATE 9/8/2014			
Conditions of Approval (if any):			
SEP 1 5 2014 / W			
			Y

