	te of New Mexico erals and Natural Resources	Form C-103 October 13, 2009
1625 N. French Dr., Hobbs, NM 88240  District II 1301 W. Grand Ave., Artesia, NM 88210  District III 1000 Rio Brazos Rd., Aztec, NM 84210 2 / 2010  District IV  1220 South St. Francis Dr.  Santa Fe, NM 87505		WELL API NO. 30-025-29204 ✓
		5. Indicate Type of Lease STATE FEE
		6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa 中からはいし 87505		
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH		7. Lease Name or Unit Agreement Name Mobil State
PROPOSALS.)  1. Type of Well: Oil Well  Gas Well  Other		8. Well Number 1 /
2. Name of Operator Merit Energy Company		9. OGRID Number 14591
3. Address of Operator 13727 Noel Rd. Suite 500 Dallas, Texas 75240		10. Pool name or Wildcat  Lea Delaware NE
4. Well Location  Unit Letter I : 1980 feet from the South line and 1980 feet from the East line		
Unit Letter J: 1980 feet from the South line and 1980 feet from the East line  Section 2 Township 20S Range 34E NMPM CountyLea		
11. Elevation (Show whether DR. RKB, RT, GR, etc.)		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION TO:  PERFORM REMEDIAL WORK  PLUG AND ABANDON  REMEDIAL WORK  ALTERING CASING  COMMENCE DRILLING OPNS. PAND A CASING/CEMENT JOB		
PULL OR ALTER CASING	PL GASING/CEIVIEN	1308
OTHER: OTHER: Change Oil Transporter effective 05/01/10   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.		
Merit Energy Company is changing the oil transporter effective 05/01/10 to:		
Enterprise Products Company Transporter OGRID: 100347 1100 Louisiana Street Suite 1000 Houston, Texas 77002		
Trouston, Texas 77002		
Spud Date:	Rig Release Date:	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNATURE Cyce Mron	TITLE Regulatory Manager	DATE 04/16/2010
Type or print name Lynne Moon	E-mail address: lynne.moon@me	eritenergy.com PHONE: (972)628-1569
For State Use Only		/ 22 .
APPROVED BY:  Conditions of Approval (if any):	TITLE OF THE M	DATE 4-28-10