

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Submit 3 Copies
to Appropriate
District Office

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

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

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

WELL API NO.
30-025-22198

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.
E-1085

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 PROPOSALS.)

7. Lease Name or Unit Agreement Name
Gallagher "8" State

1. Type of Well:
OIL WELL ☐ GAS WELL ☒ OTHER ☒ **SI**

8. Well No.
2

2. Name of Operator
Merit Energy Company

9. Pool name or Wildcat
N. Vacuum, Atoka Morrow

3. Address of Operator
12222 Merit Dr., Suite 1500, Dallas, Tx. 75251

4. Well Location
Unit Letter **M** : **660** Feet From The **South** Line and **660** Feet From The **West** Count
Section **8** Township **17S** Range **34E** NMPM **LEA**

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
4104' GR

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input checked="" type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMEN <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: _____		OTHER: TA Status	

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

****Merit Energy Company respectfully request to extend TA STATUS for this well for an additional year for future utility. Mechanical Integrity Test performed on October 3, 1997. (*SEE CHART ATTACHED)**

This document is dated **11/17/2008**
Approved by _____

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE **Martha J. Rogers** TITLE **Mgr., Reg. Affairs**

DATE **10/13/97**

TYPE OR PRINT NAME **MARTHA J. Rogers**

TELEPHONE NO. _____

(This space for State Use)

ORIGINAL SIGNATURE OF WILLIAMS
DISTRICT SUPERVISOR

APPROVED BY _____

TITLE _____

DATE _____

CONDITIONS OF APPROVAL, IF ANY:

NOV 18 1997



