Subrut 5 Copies Appropriate District Office	State of New Energy, Minerals and Natur		Form C-104 Revised 1-1-89 See Instructions
P.O. Box 1980, Hobbs, NM 88240 DISTRICT II P.O. Drawer DD, Artenia, NM 88210	OIL CONSERVAT P.O. Box	2088	at Bottom of Page
Santa Fe, New Mexico 87504-2088			
I. TO TRANSPORT OIL AND NATURAL GAS			
Operator Merit Energy Company	ıy	Well Al	30-025-11433
Address 12221 Merit Drive, Suite 1040, Dallas, TX 75251			
Reason(s) for Filing (Check proper box) Other (Please explain) New Well Change in Transporter of:			
Recompletion	Oil Dry Gas EFFECTIVE <u>12/1/91</u> 1/1/92 Casinghead Gas Condensate		
If change of operator give name Bridge Oil Company, L. P., 12404 Park Central Dr., Ste 400, Dallas, TX 75251			
II. DESCRIPTION OF WELL AND LEASE			
Lesse Name Humphrey Queen Uni	t 18 Well No. Pool Name, Includin Langlie Mat	g Formation Kind o tix 7 Rivers Queen State,	Lease Lease No. ederal br Fee 032592
Location T	2214	S line and 990 Free	E
Unit Letter		AANO BAG / ~	t From TheLine
Section I Townshi	p 25S Range 37E	, NMPM,	ea. County
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authonized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent)			
Shell Pipeline		P. O. Box 2648, Housto Address (Give address to which approved	
Name of Authorized Transporter of Casin Sid Richardson Carbon			0, Ft. Worth, TX 76102
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. F+K 3 258 37E	Is gas actually connected? When Yes	'UNKNOWN
If this production is commingled with that from any other lease or pool, give commingling order number:			
Designate Type of Completion	Oil Well Gas Well	New Weil Workover Deepen	Plug Back Same Res'v Diff Res'v
Designate Type of Completion Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Perforations			Depth Casing Shoe
TUBING, CASING AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
V. TEST DATA AND REQUE	ST FOR ALLOWABLE		
	recovery of total volume of load oil and must	be equal to or exceed top allowable for the Producing Method (Flow, pump, gas lift,	
Date First New Oil Run 10 Tank	Date of Test		
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbis.	Water - Bbis.	Gas- MCF
GAS WELL		<u></u>	
Actual Prod. Test - MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
VL OPERATOR CERTIFI	CATE OF COMPLIANCE gulations of the Oil Conservation	OIL CONSERV	ATION DIVISION
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		Date Approved JAN 17'92	
On a Manh		By Geologist	
Simalu		By Paul Kau	
Printed Name	ecutive Vice President	Title	
<u>1/15/92</u> Dale	214/701-8377 - Telephone No.		
INSTRUCTIONS: This form is to be filed in compliance with Rule 1104			

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.

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2) All sections of this form must be filled out for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
Separate Form C-104 must be filed for each pool in multiply completed wells.

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