nit 3 Copies appropriate atrict Office

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

OIL CONSERVATION DIVISION DISTRICT I P.O. Box 1980, Hobbs, NM 88240 WELL API NO. P.O. Box 2088 30-025-11610 Santa Fe. New Mexico 87504-2088 DISTRICT II P.O. Drawer DD, Artesia, NM 88210 5. Indicate Type of Lease FEE XX DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410 6. State Oil & Gas Lease No. SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) Type of Well: GAS WELL Langlie Mattix Queen Unit OTHER WIW WELL 8. Well No. 2. Name of Operator Merit Energy Company 9. Pool name or Wildcat 3. Address of Operator Langlie Mattix 7 Rivers Queen 12222 Merit Drive, Suite 1500 Dallas, Texas 75251 Well Location East 660 Line 1980_ Feet From The North Feet From The Line and Lea 37E County hip 25S Range 3/E 10. Elevation (Show whether DF, RKB, RT, GR, etc.) **NMPM** 15 Township Section 3116 GR Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 11. SUBSEQUENT REPORT OF: NOTICE OF INTENTION TO: ALTERING CASING REMEDIAL WORK PLUG AND ABANDON PERFORM REMEDIAL WORK PLUG AND ABANDONMENT COMMENCE DRILLING OPNS. **CHANGE PLANS** TEMPORARILY ABANDON CASING TEST AND CEMENT JOB **PULL OR ALTER CASING** Pressure Test OTHER: OTHER: 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. Pressure Test done after workover. CSG Press 540 Tbg Press 0 Chart attached

I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNATURE	Regulatory Manager	DATE10/20/94
TYPE OR PRINT NAME	Sheryl J. Carruth	TELEPHONE NO 214-701-837
(This space for State Use)	THE SECOND SECON	NOV 0 1 1994
APPROVED BY	FANY:	DATE