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Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico .gy, Minerals and Natural Resources Departme.

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

O perator Merit Energy Compar					Well Al		1100	
Merit Energy Compan		30-025-11688						
12221 Merit Drive,	Suite 1040	, Dallas, TX 7	75251:		•			
Reason(s) for Filing (Check proper box)			Other (P	lease explai	n)			
New Well	o _r	in Transporter of:	ppec	EFFECTIVE 12/1/01 1/1/02				
Recompletion \square	Oil Casinghead Gas	Dry Gas Condensate	EFFECTIVE 12/1/91 1/1/92					
f change of operator give name Bridg			404 Park C	entral	Dr Ct	e 400 l)allas	TX 7525
nd address of previous operator billed I. DESCRIPTION OF WELL		.,, ., ., 12.	.or laik C					
Lease Name	Name Well No. Pool Name, including Fe					Lease	ما لد	ise No.
Langlie Mattix Queen	Unit 40	Langlie Ma	ttix 7 Riv	ers Qu	een State, P	ederal of Fee	기	
Location	1150		. 1		_		سر	
Unit Letter	: <u>1650</u>	Feet From The	Line and	1_/65	<i>O</i> Fee	t From The _		Line
Section 22 Townshi	ip 25S	Range 37E	, NMPM	, NMPM, Lea				County
	:cnone===							
III. DESIGNATION OF TRAN Name of Authorized Transporter of Oil	C	OIL AND NATUE	RAL GAS Address (Give ad	dress to wh	ich annemed	come of this for	- is to be se	
Shell Pipeline			P. O. Box			u <i>)</i>		
Name of Authorized Transporter of Casin			Address (Give ad					ਪ)
	Richardson Carbon & Gasoline Co.					0, Ft. Worth, TX 76102		
If well produces oil or liquids, give location of tanks.					When	10/20	1/71	
If this production is commingled with that			Yes			12	///	W31.7 S.A. 171. :
IV. COMPLETION DATA			ing older humber. IE CO Eff	3/3/03	3			en e
Designate Type of Completion	Oil V		New Well W		Deepen	Plug Back	Same Res'v	Diff Reg'v
Date Spudded	Date Compi. Read	ly to Prod.	Total Depth		J	P.B.T.D.		<u></u>
Elevations (DF, RKB, RT, GR, etc.)	Name of Producin	ig Formation	Top Oil/Gas Pay			Tubing Depth		
Perforations	<u> </u>			Depth Casing Shoe				
							, -	
	TUBING, CASING AND				D			
HOLE SIZE	HOLE SIZE CASING & TUBING		DE	PTH SET	·	9	ACKS CEM	ENT
						1		
								
}						 		
						1		
V. TEST DATA AND REQUE								
OIL WELL (Test must be after	recovery of total vol	WABLE lume of load oil and musi					or full 24 hou	rs.)
<u> </u>			t be equal to or ex. Producing Metho				or full 24 hou	rs.)
OIL WELL (Test must be after	recovery of total vol						or full 24 hou	rs.)
OIL WELL (Test must be after Date First New Oil Run To Tank	Date of Test		Producing Metho			uc.)	or full 24 hou	rs.)
OIL WELL (Test must be after Date First New Oil Run To Tank Length of Test Actual Prod. During Test	Date of Test Tubing Pressure		Producing Methology Casing Pressure			Choke Size	or full 24 hou	rs.)
OIL WELL (Test must be after Date First New Oil Run To Tank Length of Test	Date of Test Tubing Pressure		Producing Methology Casing Pressure	od (Flow, pi		Choke Size Gas- MCF		<i>ys.</i>)
OIL WELL (Test must be after Date First New Oil Run To Tank Length of Test Actual Prod. During Test GAS WELL	Date of Test Tubing Pressure Oil - Bbis.		Producing Methology Casing Pressure Water - Bbls. Bbls. Condensat	od (Flow, pi		Choke Size		rs.)
OIL WELL (Test must be after Date First New Oil Run To Tank Length of Test Actual Prod. During Test GAS WELL	Date of Test Tubing Pressure Oil - Bbis.	lume of load oil and must	Producing Methology Casing Pressure Water - Bbls.	od (Flow, pi		Choke Size Gas- MCF		rs.)
OIL WELL (Test must be after Date First New Oil Run To Tank Length of Test Actual Prod. During Test GAS WELL Actual Prod. Test - MCF/D	Date of Test Tubing Pressure Oil - Bbis. Length of Test Tubing Pressure	(Shui-in)	Producing Metho Casing Pressure Water - Bbls. Bbls. Condensat	od (Flow, production) e/MMCF (Shut-in)	ump, gas lift, d	Choke Size Gas- MCF Gravity of C	Condensate	
OIL WELL (Test must be after Date First New Oil Run To Tank Length of Test Actual Prod. During Test GAS WELL Actual Prod. Test - MCF/D Testing Method (pitot, back pr.) VI. OPERATOR CERTIFI Thereby certify that the rules and reg	Date of Test Tubing Pressure Oil - Bbls. Length of Test Tubing Pressure CATE OF CC gulations of the Oil C	(Shul-in) OMPLIANCE Conservation	Producing Metho Casing Pressure Water - Bbls. Bbls. Condensat	od (Flow, production) e/MMCF (Shut-in)	ump, gas lift, d	Choke Size Gas-MCF Gravity of C Choke Size	Condensate DIVISIO	
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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.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.

4) Separate Form C-104 must be filed for each pool in multiply completed wells.

RECEIVED

APR 2 0 1993

OCO HORRE AT

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Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

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at Bottom of Page

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

perstor When it Francy Company							Well A	Well API No. 30-025-11688				
Merit Energy Company							00 020 11000					
12221 Merit Drive,	Suite	1040, I	Dalla	s, TX 7								
eason(s) for Filing (Check proper box)		G in	т	dan afi	Other	(Please explai	in)					
ew Well U	Oil	Change in Transporter of: Oil Dry Gas				EFFECTIVE 12/1/91 1/1/92						
ange in Operator	Casinghea	d Gas	Conden	sate 🗌								
hange of operator give name aridg	e Oil C	Company	, L.	P., 12	404 Park	Central	Dr., S1	te 400,	Dallas,	TX 75251		
DESCRIPTION OF WELL		ASE			- · · · · · · · · · · · · · · · · · · ·							
case Name Langlie Mattix Queen	Unit	Well No.	Pool Na	ame, Includia olie Ma	gFormation ttix 7 R	ivers Qu	Kind o leen State, I	Lease ederal or Fee		ise No.		
cation		70				<u>`</u>						
Unit Letter	. 16	50	Feet Fr	om The	✓ Line	and 165	<u>50</u> F ∞	et From The _	E	Line		
				770				ea		G		
Section 22 Townsh	ip 253		Range	37E	, NN	ирм,	L	<u></u>		County		
I. DESIGNATION OF TRAN		or Conde		D NATUI	RAL GAS	e address to wi	rich approved	copy of this fe	orm is to be ser	<u></u>		
Shell Pipeline					Address (Give address to which approved copy of this form is to be sent) P. O. Box 2648, Houston, TX 77252							
lame of Authorized Transporter of Casin			or Dry	Gas 🗔		e address to wi						
Sid Richardson Carbon						in St.,Sı	uite 300 When		Worth, T	X 76102		
f well produces oil or liquids, ive location of tanks.	Unit	Sec. 15	Twp. 25S			y connected? es	Wilco	10/2	9/7/			
this production is commingled with the	t from any of									44 4 44		
V. COMPLETION DATA									<u> </u>			
Designate Type of Completion	1 - (X)	Oil Wel	II	Gas Well	New Well	Workover	Deepsn-	Plug Back	Same Res'y	Diff Res'v		
Date Spudded		npi. Ready t	to Prod.		Total Depth	<u> </u>		P.B.T.D.		<u> </u>		
vations (DF, RKB, RT, GR, etc.) Name of Producing Formation			Top Oil/Gas	Pay		Tubing Depth						
Perforations		,			<u> </u>			Depth Casi	ng Shoe			
		_										
					CEMENT	NG RECO						
HOLE SIZE	c	CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT			
								 				
	- 											
V. TEST DATA AND REQUIDED IL WELL (Test must be afte	EST FOR	ALLOW	V ABLI	t oil and mus	t he equal to a	or exceed top at	lowable for th	is depth or be	for full 24 hos	ors.)		
Date First New Oil Run To Tank	Date of		2 0) 1001	300000000000000000000000000000000000000	Producing N	Method (Flow, p	o ump , gas lift,	etc.)	<u>, , , , , , , , , , , , , , , , , , , </u>	_, ·		
					<u> </u>			O also Sina				
Length of Test	Tubing	Tubing Pressure		Casing Pressure			Choke Size					
Actual Prod. During Test	Oil - Bb	Oil - Bbls.				Water - Bbis.			Gas- MCF			
					<u> </u>							
GAS WELL												
Actual Prod. Test - MCF/D	Length	Length of Test			Bbls. Condensate/MMCF			Gravity of Condensate				
	Tubina	Pressure (SI	hut-in)	··	(Casing Pres	saure (Shut-in)		Choke Siz	ve.			
Testing Method (pitot, back pr.)	Tubing	Ticadic (S	uus-m)			,			-			
VI. OPERATOR CERTIF	ICATE (OF COM	/PLLA	NCE		011 00		44=:0				
I hereby certify that the rules and re	gulations of	the Oil Con	servation)	1	OIL CO	NSEH					
Division have been complied with a is true and complete to the best of the bes				ove				J	AN 223	32		
to day also complete to allo the fit			0		ll Da	te Approv	/ea					
C/2.a.a.	1//	me!			D.,	Obloss	Al ciasio:					
Signature Ex	Marek Executive Vice President				В	ORIGIN.	AL SIGNED DISTRICT ()					
Joe A Marek Ex			Title	e	Titl	e						
1/15/92	2	214/701										
Date			Telephon	e No.					· 			

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