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Appropriate District Office
DISTRICT I
P.O. Box 1960, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

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

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

OIL CONSERVATION DIVISION

P.O. Box 2088

DISTRICT III

Santa Fe, New Mexico 87504-2088

1000 Rio Brazos Rd., Azzec, NM 87410	REQ					AUTHORIZ					
I. Uperator		TO TRA	NSP	ORT OI	L AND NA	TURAL GA		A DI NIS			
Merit Energy Company							Weil API No. 30-025-23/86				
Address 12221 Merit Drive, Sui	ite 104	10, Dal	las,	TX 752	251					- 	
Reason(s) for Filing (Check proper box)					i Oti	her (Please expla	iin)				
New Well Recompletion	Oil	Change in			E	FFECTIVE =	12/1/91	1/1/9	2		
Change in Operator X	Casinghe		Conde				, -, -, -	(-		
If change of operator give name and address of previous operator Brid	dge Oi.	l Compa	my,	L. P.,	12404 P	ark Centr	al Dr.,	Ste 40	O, Dalla	s,TX 7525	
II. DESCRIPTION OF WELL	AND LE	ASE									
Lease Name Langlie Mattix Queen					ing Formation	Rivers Qu		of Lease Federal or Fe	e LCC	ease No. 056968	
Location		10							4. /		
Unit Letter/V	_ :6	68	_ Feet F	rom The _	_ ``` Liı	ne and	<u> 3</u> ブ F	eet From The	_ <i>W</i>	Line	
Section 15 Townshi	p 25	5S	Range	37	Ε , Ν	IMPM,		Lea		County	
III. DESIGNATION OF TRAN	ייים	የው ጥር ጥ	IT AN	ייד אוא חוו	IDAI CAS						
Name of Authorized Transporter of Oil		or Conde		TAIL		ve address to wi	uch approved	copy of this	form is to be se	ent)	
NOT APPLICABLE - WATER INJECTION											
Name of Authorized Transporter of Casinghead Gas or Dry Gas					Address (Gi	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids,	Sec. Twp. Rge.			Is gas actua	Is gas actually connected? When			?			
give location of tanks. If this production is commingled with that	from sev e	her less s	1	1	aliaa c-t	-		·····	· · · · · · · · · · · · · · · · · · ·		
IV. COMPLETION DATA	HUM ANY O	met terre of	pool, gr	AS COMMIN	kung ouder nun	noer:					
Designate Type of Completion	- (X)	Oil Wel	1	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Spudded		npi. Ready t	o Prod.		Total Depth	1	<u> </u>	P.B.T.D.			
		, ···· ·- , ·						r.b.1.D.			
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil Gas	Top Oil Gas Pay			Tubing Depth		
Perforations									Depth Casing Shoe		
					:-						
HOLE SIZE					CEMENT	ING RECOR DEPTH SET		•	SACKS OF	CNIT	
11000 0120	HOLE SIZE CASING & TUBING SIZE							SACKS CEMENT			
	+										
V. TEST DATA AND REQUE									· 		
OIL WELL (Test must be after to Date First New Oil Run To Tank			of load	oil and mu					for full 24 hou	rs.)	
Describe New Oil Run 10 120K	Date of T	<i>E</i> 22			· rrounding N	Method (Flow, pi	ипр. gas lyt.	eic.j			
Length of Test	Tubing Pressure				Casing Pres	sure		Choke Size			
Actual Prod. During Test	Oil - Bbls.				Water - Bhi	Water - Bbls			Gas- MCF		
	OII + DUIS.										
GAS WELL											
Actual Prod. Test - MCF/D	Length of Test				Bbls. Coade	Bbls. Condensate/MMCF			Gravity of Condensate		
Testing Method (pitot, back pr.)	Tubing Pressure (Shui-in)				Casing Pres	Casing Pressure (Shut-in)			Choke Size		
VI. OPERATOR CERTIFIC				NCE		OIL CON		'ATION	DIVICIO) NI	
I hereby certify that the rules and regularision have been complied with and	that the inf	ormation gi	rvation ven abov	/e			YOEN V	ATION	אופוגוח	אוכ	
is true and complete to the best of my knowledge and belief.					Date Approved			JAN 22'92			
1	711	1				- / .ppi046	<u> </u>				
Signature	11/1	my			By_	ORIG:					
Joe A Marek Exe	cutive	Vice F	resi Tide	dent			JAL.	_			
1/15/92	21	4/701-8		·	Title	9					
Date			lephone	No.	11						

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 weils.
- 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.

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JAN 16 1992

HOBBS OFFICE