Subrut 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, 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

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, Artesia, NM 88210

REQUEST FOR ALLOWABLE AND AUTHORIZATION

·	<u> </u>	<u>O IHA</u>	11121	POHT OIL	AND NAT	UHAL GA					
Operator Merit Energy Company								Well API No. 30-025-28012			
Address 12221 Merit Drive,	<u> </u>	.040	Dal	las. TX 7	75251						
Reason(s) for Filing (Check proper box)						(Please explai					
New Well		Change in	Trans	sporter of:		i i icase capia.	.,			ì	
Recompletion	Oil		Dry	• —	EFF	ECTIVE_1	2/1/91 1	/1/92			
Change in Operator	Casinghead		-	densate				<u> </u>			
f change of operator give name and address of previous operator Bridge	_		, I	P 12	404 Park	Central	Dr., S1	te 400.	Dallas,	TX 75251	
I. DESCRIPTION OF WELL A			, .	,			,				
Lease Name	ĺ	Well No.	Pool	Name, Includin	g Formation			(Lease		ase No.	
Humphrey Queen Unit		30	La	inglie Ma	ttix / R	.ivers Qu	een State, I	rederal or Fee	<u> </u>		
Location Unit Letter	. 23	88	_ Feet	From The	N Line	and/30	00F	et From The	W	Line	
Section 3 Township	•					_			ea County		
III. DESIGNATION OF TRANS	<u></u>			<u> </u>							
Name of Authorized Transporter of Oil	X	or Conde				address to wh	ich approved	copy of this fe	orm is to be se	nt)	
Shell Pipeline				L		3ox 2648,					
Name of Authorized Transporter of Casing		X		Ory Gas		e address to wh					
Sid Richardson Carbon		in St.,Su	<u>iite 300</u>	0, Ft.	Worth, T	X 76102					
If well produces oil or liquids,	Unit Sec. Twp. Rge. I				Is gas actually connected? When			1/26/83			
ve location of tanks. $F+K \mid 3 \mid 25S \mid 37E$					Yes			126/03			
If this production is commingled with that if IV. COMPLETION DATA	from any other	er leass of	pool,	give commingli	ing order num	xer:				· · · · · · · · · · · · · · · · · · ·	
	~~	Oil Wel	11	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 Casir	ig Snoe		
	Т	UBING	. CA	SING AND	CEMENTI	NG RECOR	D.				
HOLE SIZE						DEPTH SET			SACKS CEMENT		
					<u> </u>						
V. TEST DATA AND REQUES											
OIL WELL (Test must be after r			e of lo	pad oil and must					for full 24 hou	ors.)	
Date First New Oil Run To Tank	Date of Te	st.			Producing M	ethod (Flow, pa	ump, gas lýt,	eic.)			
Learnh of Test	(Tubing Dungs)				Casing Press	1179		Choke Size			
Length of Test	Tubing Pressure				County 1 1000016						
Actual Prod. During Test	Oil - Bbis.				Water - Bbis.			Gas- MCF			
GAS WELL					<u> </u>			- !	·		
Actual Prod. Test - MCF/D	Length of Test				Bbls. Condensate/MMCF			Gravity of Condensate			
					}						
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size			
VL OPERATOR CERTIFIC	TATE OF	COM	י זכח	ANCE	1			1			
						OIL COI	NSERV	ATION	DIVISIO	NC	
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above											
is true and complete to the best of my knowledge and belief.					Dat	e Approve	ad	JAI	17'92		
	ررا	,			Dal						
Clack Manh						1	Signed	l by			
Signature		17:	0.		∥ By_		Geologia	4			
	<u>cutive</u>	Vice					- ANTORIGE	F as			
Printed Name 1/15/92	21	4/701		ule 77 -	Title)					
1/15/92 Date				one No.							
		•			H						

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.