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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS
JUN - 5 1978

Form C-104
Supersedes Old C-101 and C-102
Effective 1-1-65

O. C. C.
ARTESIA, OFFICE

Operator		Marbob Energy Corporation	
Address			
P.O. Box 304, Artesia, N.M. 88210			
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well	☐	Designate	Gas Connection
Recompletion	☐	Change in Transporter of:	
Change in Ownership	☐	Oil ☐ Dry Gas ☐	
		Casinghead Gas ☒ Condensate ☐	

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE		B-7222 2/25/63	
Lease Name	Well No.	Pool Name, including Formation	Kind of Lease
Turkey Track Sec. 3 Unit	2	Turkey Track Queen Grayburg	State, Federal or Fee
Location			State
Unit Letter	C	660 Feet From The North Line and 1980 Feet From The West	
Line of Section	3	Township 19S	Range 29E
		NMPM	Eddy

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS			
Name of Authorized Transporter of Oil ☒ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)		
Navajo Refining Co., Pipeline Division	N. Freeman Ave., Artesia, N.M.		
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)		
Phillips Petroleum Co.	Bartlesville, Oklahoma		
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.
	F	3	19
			29
			Yes
			5/19/78

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA			
Designate Type of Completion - (X)	Oil Well	Gas Well	New Well
			Workover
			Deepen
			Plug Back
			Same Reservoir
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Elevations (DE, 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 REQUEST FOR ALLOWABLE OIL WELL		(Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)	
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL			
Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (flow, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		APPROVED JUN - 6 1978	
Cecilia A. Gressett (Signature) Secretary (Title)		BY W. A. Gressett SUPERVISOR, DISTRICT II	
(Date)		This form is to be filed in compliance with RULE 1104. If this be a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the actual data taken on the well in accordance with RULE 111. All portions of this form must be filled out completely for all wells on new and completed wells. Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter or other such change of conditions.	