UIL CONSERVATION COMMISSION Form C-104 SANTA FE Supersedes Old C-104 and C-110 Effective 1-1-65 REQUEST FOR ALLOWABLE FILE AND U.S.G.S. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS LAND OFFICE RECEIVED OIL I RANSPORTER GAS OPERATOR 1975 JUN 2 PRORATION OFFICE Operator Mark Production Company <u>o. c.</u> c. ARTESIA, OFFICE Address 75701 330 Citizens Bank Building, Tyler, Texas Reason(s) for filing (Check proper box) Other (Please explain) ΚX New Well Change in Transporter of: Dry Gas to indicate purchaser of condensate Recompletion Casinghead Gas Condensate Change in Ownership If change of ownership give name and address of previous owner II. DESCRIPTION OF WELL AND LEASE Kind of Lease Well No. Pool Name, Including Formation Lease No. NM 064348 Federal "C" Com Cemetary (Morrow) State, Federal or Fee Federal 1 North__Line and_ 1980 660 East Η Feet From The Feet From The Eddy 25E 20S 7 County Range Township Line of Section II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS or CondensateXX Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Oil Drawer 175, Artesia, New Mexico 88210 Address (Give address to which approved copy of this form is to be sent) Narvajo Crude Oil Purchasing Company Name of Authorized Transporter of Casinghead Gas or Dry Gas XX Fidelity Union Tower, Dallas, Texas 75201 Southern Union Gas Company When Is gas actually connected? Unit Sec. Twp. P.ge. If well produces oil or liquids, give location of tanks. 7 25E H 20S Yes If this production is commingled with that from any other lease or pool, give commingling order number: V. COMPLETION DATA Same Res'v. Diff. Res'v. Workover Deepen Plug Back New Well Oil Well ¹ Gas Well Designate Type of Completion - (X) Date Compl. Ready to Prod. Total Depth P.B.T.D. Top Oil/Gas Pay Tubing Depth Name of Producing Formation Elevations (DF, RKB, RT, GR, etc.) Depth Casing Shoe Perforations TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT DEPTH SET CASING & TUBING SIZE HOLE SIZE (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) V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tanks Date of Test Choke Size Tubing Pressure Casing Pressure Length of Test Gge - MCF Water - Bble. Oil - Bbls. Actual Prod. During Test **GAS WELL** Gravity of Condensate Bbls. Condensate/MMCF Length of Test

Actual Prod. Test-MCF/D Choke Size Casing Pressure (Shut-in) Testing Method (pitot, back pr.) Tubing Pressure (Shut-in)

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information giver above is true and complete to the best of my knowledge and belief.

11/hulone	Lola	
	(Signature)	-
Production Cl	erk	

(Date)

(Title)

May 30, 1975

OIL CONSERVATION COMMISSION

JUN 16 1975 APPROVED BY_

SUPERVISOR, DISTRICT II TITLE .

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, ell name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.