## SANTA FE FILE U.S.G.S.

## NEW MEATICE DIE CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

	OIL /	1	RECEIVE	)	
	TRANSPORTER GAS /		K L C L I V L D		
1.	OPERATOR / PROPATION OFFICE		SEP 1 3 1976	SEP 1 3 1976	
1.	Operator				
	Mark Production Company  O.C.C.				
	330 Citizens Bank Building, Tyler, Texas 75701				
	Reason(s) for filing (Check proper box)  Other (Please explain)				
	New Well	Change in Transporter of:	as kx Name of Pur	chaser of gas changed.	
	Recompletion Change in Ownership	Oll Dry Go Casinghead Gas Conde	Fffortivo A	ective August 1, 1976.	
	If change of ownership give name				
**	and address of previous owner	I FACE			
11.	Lease Name	Well No. Pool Name, Including F	1	2000 1101	
	Federal "C" Com	1 Cemetary	(MOTTOW) State, Feder	ol or Fee Federal NM 06434	
	1	P80 Feet From The No. Lin	ne and Feet From	The East	
	Line of Section 7 To	wnship 20 S Range	25 E , <sub>NMPM</sub> ,	Eddy County	
m.	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	<b>1</b> S		
	Name of Authorized Transporter of Oil or Condensate XX  Navajo Crude Oil Purchasing Company		Address (Give address to which approved copy of this form is to be sent)  Drawer 175, Artesia, New Mexico 88210		
	Name of Authorized Transporter of Casinghead Gas or Dry Gas XX Address (Give address to which approved copy of this form is to be			oved copy of this form is to be sent)	
	Gas Company of New	Mexico Unit Sec. Twp. P.ge.		Building, Dallas, Texas	
	If well produces oil or liquids, give location of tanks.	H 7 20 S 25 #		6/12/75	
	If this production is commingled wi COMPLETION DATA	th that from any other lease or pool,	give commingling order number:	,	
•••	Designate Type of Completic	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Resty. Diff. Resty.	
		Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	Date Spudded	Bute Compt. Reday to From.	Total Deptil	F.B.11.5.	
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
	Perforations			Depth Casing Shoe	
	TUBING, CASING, AND		D CEMENTING RECORD		
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
V.	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a	fter recovery of total volume of load oil	and must be equal to or exceed top allow-	
i	OIL WELL  able for this depth or be for full 24 hours)  Date First New Oil Bun To Tanks  Date of Test  Producing Method (Flow, pump, gas lift, etc.)				
	Date / Hat New On Hair to 7 ams				
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
	Actual Prod. During Test	OII - Bbls.	Water-Bbls.	Gan-MCF	
1					
ſ	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
	Actual Prod. 1981-MCP/D	Length of Year			
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
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 given above is true and complete to the best of my knowledge and belief.		OIL CONSERVATION COMMISSION SEP 14 1976		
			BY W. a. Gressett		
			TITLE SUPERVISOR, DISTRICT IL		
	727 1 2 2 /		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.		
_	(Signature)				
	Production Clerk				
-	(Title)		All sections of this form must be filled out completely for allowable on new and recompleted wells.		
	September 8, 1976		Fill out only Sections I. II. III, and VI for changes of owner, well 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.