

NO. OF COPIES RECEIVED		7
DISTRIBUTION		
SANTA FE		1
FILE		1
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	1
	GAS	1
OPERATOR		
PRORATION OFFICE		

NEW MEXICO OIL 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

Operator Marathon Oil Company	
Address P. O. Box #39, Sidney, Nebraska 69162	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Jicarilla Apache	Well No. 16	Pool Name, Including Formation Basin Dakota	Kind of Lease State, Federal or Fee Federal	Lease No.
Location				
Unit Letter I ; 1,600 Feet From The south Line and 900 Feet From The east				
Line of Section 34 Township 26N Range 5W , NMPM, Rio Arriba County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Plateau, Inc.	P.O. Box 108, Farmington, New Mexico 87401
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Company	P. O. Box 990, Farmington, New Mexico 87401
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
I 34 26N 5W	No

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 Res'v.	Diff. Res'v.
		X	X					
Date Spudded July 29, 1972	Date Compl. Ready to Prod. August 15, 1972	Total Depth 7,406'	P.B.T.D. 7,365'					
Elevations (DF, RKB, RT, GR, etc.) 6,603' GR, 6,616' RKB	Name of Producing Formation Dakota Sand	Top Oil/Gas Pay 7,130'	Tubing Depth 7,070'					
Perforations 7,134'-42', 7,262'-74', 7,291'-96', 7,306'-13', 7,350'-58'			Depth Casing Shoe 7,405'					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
15"	10-3/4", 32.75#		314'		340			
9-7/8"	7-5/8", 24#		3,079'		550			
6-3/4"	4-1/2", 11.60#		7,405'		466			
	2-3/8", 4.7#		7,070'		No packer			

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 2,150	Length of Test Three hours	Bbls. Condensate/MMCF Not measured	Gravity of Condensate -
Testing Method (pitot, back pr.) Back pressure	Tubing Pressure (Shut-in) 2,373 psig	Casing Pressure (Shut-in) 2,383 psig	Choke Size 3/4"

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.

Frank Bant  
(Signature)  
District Operations Manager  
(Title)  
October 6, 1972  
(Date)

OIL CONSERVATION COMMISSION  
NOV 15 1972  
APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY Original Signed by Emery C. Arnold  
SUPERVISOR DIST. #0  
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, 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.