

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

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FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

Operator  
**Marathon Oil Company**

Address  
**P.O. Box 2659, Casper, WY 82602**

Reason(s) for filing (Check proper box) Other (Please explain)

New Well  Change in Transporter of:

Recompletion  Oil  Dry Gas

Change in Ownership  Casinghead Gas  Condensate

If change of ownership give name and address of previous owner \_\_\_\_\_

**DESCRIPTION OF WELL AND LEASE**

Lease Name <b>Jicarilla Apache</b>	Well No. <b>10E</b>	Pool Name, including Formation <b>Basin Dakota</b>	Kind of Lease <b>Tract 251 State, Federal or Fee Contract</b>	Lease No. <b>000154</b>
Location				
Unit Letter <b>C</b>	; <b>1,040</b> Feet From The <b>North</b> Line and		<b>1,685</b> Feet From The <b>West</b>	
Line of Section <b>27</b>	Township <b>26N</b>	Range <b>5W</b>	, NMPM, <b>Rio Arriba</b> County	

**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)					
<b>Plateau Inc.</b>	<b>P.O. Box 108, Farmington, NM 87401</b>					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
<b>Northwest Pipeline Corp.</b>	<b>P.O. Box 90, Farmington, NM 87401</b>					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
<b>None</b>	<b>None</b>				<b>No</b>	<b>April 1, 1981</b>

If this production is commingled with that from any other lease or pool, give commingling order number: **None**

**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 <b>8-28-80</b>	Date Compl. Ready to Prod. <b>2-6-81</b>	Total Depth <b>7,366'</b>		P.B.T.D. <b>7,633'</b>				
Elevations (DF, RKB, RT, GR, etc.) <b>6,498' GL, 6,510' KB</b>	Name of Producing Formation <b>Graneros Dakota</b>	Top Oil/Gas Pay <b>7,136'-7,142'</b> <b>7,259'-7,366'</b>		Tubing Depth <b>7,128'</b>				
Perforations <b>7,344'-7,366', Open Hole 7,259'-7,259', 26 Shots</b>		Depth Casing Shoe						
<b>2 shots/ft., .4" DI Hole 7,136'-7,142', 12 Shots</b>		<b>7,292'-7,298', 12 Shots</b>						
<b>TUBING, CASING, AND CEMENTING RECORD</b>								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		STOCKS CEMENT			
<b>13-3/4"</b>	<b>9-5/8" 36#</b>		<b>486'</b>		<b>50</b>			
<b>8-3/4"</b>	<b>7" 20#</b>		<b>3,137'</b>		<b>150</b>			
<b>6-1/4"</b>	<b>4-1/2" 11.6#, 10.5#</b>		<b>7,349'</b>		<b>250</b>			

**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 <b>272</b>	Length of Test <b>24 Hours</b>	Bbls. Condensate/MMCF <b>.0158</b>	Gravity of Condensate <b>56.6</b>
Testing Method (pilot, back pr.) <b>Orifice</b>	Tubing Pressure (shut-in) <b>1,220 psig</b>	Casing Pressure (shut-in) <b>1,360 psig</b>	Choke Size <b>16/64"</b>

**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.

*Bald Caddy*  
(Signature)

District Operations Manager

(Title)

March 3, 1981

(Date)

OIL CONSERVATION COMMISSION

APPROVED MAR 1981, 19

BY Original Signed by FRANK T. CHAVEZ

SUPERVISOR DISTRICT # 3

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

