

## OIL CONSERVATION DIVISION

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

### REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator Marathon Oil Company		Well API No. 30-045-7411
Address P.O. Box 552 Midland, Texas 79702		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input type="checkbox"/>	Change in Transporter of:	
Recompletion <input checked="" type="checkbox"/>	Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator		

### II. DESCRIPTION OF WELL AND LEASE

Lease Name Ohio Govt.	Well No. 2	Pool Name, including Formation Gallup <i>Umata</i>	Kind of Lease State, Federal or Fee	Lease No. NM-020498
Location Unit Letter <u>P</u> : 890 Feet From The <u>South</u> Line and 990 Feet From The <u>East</u> Line Section 15 Township 28-N Range 11-W, NMPM, San Juan County				

### III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) P.O. Box 195, Bloomfield, NM 87413					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) P.O. Box 4990, Farmington, NM 87499					
If well produces oil or liquids, give location of tanks.	Unit P	Sec. 15	Tw. 28N	Rge. 11W	Is gas actually connected? yes	When? 1961

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 <input checked="" type="checkbox"/>	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 10/14/60	Date Compl. Ready to Prod. 8/1/92	Total Depth 6225	P.B.T.D. 5849					
Elevations (DF, RKB, RT, GR, etc.) 5517 GL; 5526 KB	Name of Producing Formation Gallup	Top Oil/Gas Pay 5120	Tubing Depth 5486					
Perforations 5120, 5122, 5142, 5166, 5192, 5213, 5224, 5248, 5283, 5306, 5317, 5327, 5335, 5363, 5376, 5394, 5405; 17 holes total	Depth Casing Shoe 6224							

#### TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
-----	10-3/4 H-40	615'	400
-----	7-5/8 J-55	1649'	475
-----	4-1/2 J-55	6224'	200
-----	2-3/8 J-55	5486'	

### 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 Tank 8/1/92	Date of Test 9/1/92	Producing Method (Flow, pump, gas lift, etc.) Pumping (1.25") Insert Pump	
Length of Test 24	Tubing Pressure 48#	Casing Pressure 48#	Choke Size None
Actual Prod. During Test Same	Oil - Bbls. 3	Water - Bbls. 2	Gas - MCF 30

### GAS WELL

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

### VI. OPERATOR CERTIFICATE OF COMPLIANCE

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

*Thomas M. Price*  
Signature  
Thomas M. Price Advanced Engineering Tech  
Printed Name  
9/22/92  
Date  
915/682-1626  
Telephone No.

### OIL CONSERVATION DIVISION

Date Approved SEP 25 1992

By *Brian J. Chang*  
SUPERVISOR DISTRICT #3  
Title

#### INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.