DISTRIBUTION	ALEMANTALES ON CONSTRUCTION COMMISSION		
SANTA FE	REQUEST FOR ALLOWABLE		Form C-104 Supersedes Old C-104 and C-11
FILE	AND		Effective 1-1-65
LAND OFFICE	AUTHORIZATION TO TRA	INSPORT OIL AND NATURAL	GAS
TRANSPORTER			
GAS :			
PRORATION OFFICE	-		
Operator Marathon Oil	Company	<u>;</u>	
Address			
	bbs, New Mexico	101 (01	
Reason(s) for filling (Check proper bo Hew Well X	Change in Transporter of:	Other (Please explain)	•
itecompletion	C.F. Dry Ga	s	
Change in Ownership	Castryhead Gas Conder	isate	
If change of ownership give name and address of previous owner	400 dt.d 100		
	× / 2		.//
DESCRIPTION OF WELL AND	Well No. Root No.	me, including Formation	Kind of Lease
Section 35 State	l -Unde	signated CHAUEROO-SA ANDRES	State, Federal or Fee State
Location L 19		R-3043	
Unit Letter ; 1)	980 Peet From The south Lin	e and 660 Feet Fron	The West
Line of Section 35 , To	ownship 78 Range	33E , NMPM, Ro	cosevelt County
DESIGNATION OF TRANSPOR	RTER OF OIL AND NATURAL GA	S	
Name of Authorized Transporter of Oil [X] or Condensate [] Address (Give address to which approved copy of this form is to be sent)			
•			od, Texas roved copy of this form is to be sent)
None	5. 51, GG		
If well produces oil or liquids,	Unit Sec. Twp. Rge. L 35 7S 33E		/hen
give location of tanks.		no	· · · · · · · · · · · · · · · · · · ·
COMPLETION DATA	ith that from any other lease or pool,	-	no
Designate Type of Complet	ion = (X) Oil Well Gas Well	New Weil Workover Deepen	Plug Back Same Res'v. Diff. Res'v.
Date Spud led	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
12-14-65	1-13-66 Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Undesignated	San Andres	4244!	4206:
Perforations		- A	Depth Casing Shoe
4244 - 43441	TUBING CASING AND	CEMENTING RECORD	4442:
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	8-5/8"	363 '	200
7-7/8"	5-1/2" 2-3/6"	<u>Lli42</u>	350
		4200	
TEST DATA AND REQUEST H		fter recovery of total volume of load or pth or be for full 24 hours)	il and must be equal to or exceed top allow-
OH. WELL Date First New Oil Bun To Tanks	Date of Test	Producing Method (Flow, pump, gas	lift, etc.)
1-13-66	1-13-66	flowing	
Length of Test	Tubing Fressure 180 - 220#	Casing Pressure Packer	Choke Size 214/614"
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
54.29 bbls	49.35	4.94 acid water	21
GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size
,		-	
CERTIFICATE OF COMPLIAN	NCE	OIL CONSERV	ATION COMMISSION
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.		APPROVED	
above is true and complete to the	ie best of my knowledge and belief.	BY	
\sim \sim \sim		TITLE	
		This form is to be filed in compliance with RULE 1104.	
	juture)	well, this form must be accomp	owable for a newly drilled or deepened banied by a tabulation of the deviation ordance with BULE-111
Areâ	a Supt.	tests taken on the well in acc	ordance with RULE 111.

(Title)

1-14-66 (Date) All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out Sections I, II, III, and VI only 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.