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

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS  
JUL 13 3 07 PM '67

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

I.

Operator		PENNZOIL COMPANY	
Address		1007 Midland Savings Bldg., Midland, Texas 79701	
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"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry 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

UNDESIGNATED

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
MARATHON-STATE	1	North Vacuum Wolfcamp (Lower)	State, Federal or Fee State	E-619
Location				
Unit Letter	L	1980 Feet From The	South Line and	660 Feet From The
Line of Section	2	Township	17-S	Range
			34-E	, NMPM, Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil	<input checked="" type="checkbox"/> or Condensate	Address (Give address to which approved copy of this form is to be sent)
Mobil Pipe Line Company		Box 900 - Dallas, Texas 75221 - Kennedy
Name of Authorized Transporter of Casinghead Gas	<input checked="" type="checkbox"/> or Dry Gas	Address (Give address to which approved copy of this form is to be sent)
Phillips Petroleum Company		Phillips Bldg., Odessa, Texas 79760
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	L	2
		17-S34-E
		No
		Soon

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	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
4-5-67	6-18-67		10,990'		10,890'			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
4052.7 GL	Lower Wolfcamp		10,698'		10,725'			
Perforations	Is gas actually connected?				When			
10,698-10,711 - 10,738-10,749	No				Soon			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/2	13-3/8		350		300			
11	8-5/8		3300		750			
7-7/8	4-1/2		10990		800			
	2-3/8 tbi.		10725					

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.)	
6-18-67	7-2-67	Pump (Hydraulic)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24	--	--	2"
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
110.61	107.61	3.00	85.5

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
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.

Redney C. Bayle  
(Signature)  
Petroleum Engineer  
(Title)  
July 11, 1967  
(Date)

OIL CONSERVATION COMMISSION

APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY \_\_\_\_\_  
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.