

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

MAR 16 1987

O. C. D. ARTESIA, OFFICE

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Marbob Energy Corporation

P.O. Drawer 217, Artesia, New Mexico 88210

Reason(s) for filing (Check proper box)
Oil Well, Change in Ownership, Change in Transporter of: Oil, Gas, Condensate, Dry Gas, Other (Please explain) Effective 3/1/87

Change of ownership give name and address of previous owner Sun Exploration & Production Co., P.O. Box 1861, Midland, TX 79702

DESCRIPTION OF WELL AND LEASE

Well Name Foster Eddy, Well No. 5, Pool Name Grbg Jackson SR Q G SA, Kind of Lease State, Federal or Fed. Fed., Lease No. 049998(a), Location B 660 Feet From The North Line and 1980 Feet From The East, Line of Section 17, Township 17S, Range 31E, NMPM, Eddy County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Designated Transporter of Oil Texas-New Mexico Pipeline Co., Designated Transporter of Gas Conoco, Inc., Address (Give address to which approved copy of this form is to be sent) P.O. Box 2528, Hobbs, N.M. 88241, P.O. Box 460, Hobbs, N.M. 88240

Well produces oil or liquids, location of tanks, Unit J, Sec. 17, Twp. 17S, Rge. 31E, Is gas actually connected? Yes

This production is commingled with that from any other lease or pool, give commingling order number:

COMPLETION DATA
Designate Type of Completion - (X) Oil Well, Gas Well, New Well, Workover, Deepen, Plug Back, Same Rest'y., Diff. Rest'y., Date Compl. Ready to Prod., Total Depth, P.B.T.D., Name of Producing Formation, Top Oil/Gas Pay, Tubing Depth, Depth Casing Shoe

TUBING, CASING, AND CEMENTING RECORD
Table with columns: HOLE SIZE, CASING & TUBING SIZE, DEPTH SET, SACKS CEMENT. Includes handwritten note: Post FO-3 3-10-87 chg up

TEST DATA AND REQUEST FOR ALLOWABLE (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)

Test Data Table: Date of Test, Producing Method, Tubing Pressure, Casing Pressure, Choke Size, Oil-Bbls., Water-Bbls., Gas-MCF

AN WELL
Date of Test, Length of Test, Bbls. Condensate/MMCF, Gravity of Condensate, Tubing Pressure (shut-in), Casing Pressure (shut-in), Choke Size

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.
Signature: Carolyn Gray, Production Clerk, Date: 3/13/87

OIL CONSERVATION DIVISION
MAR 19 1987
APPROVED BY: Les A. Clements, Supervisor District II
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.