

RECEIVED

APR 16 '90

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

CO. OF 10000 DEGREE	
DISTRICT	
SANTA FE	
FILE	
U.S.A.	
LAND OFFICE	
TRANSPORTER	<input checked="" type="checkbox"/> OIL
OPERATOR	<input checked="" type="checkbox"/> GAS
PRODUCTION OFFICE	

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501Form C-104  
Revised 10-01-78  
Format 08-01-83  
ARTESIA, OFFICE Page 1REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

ST

Operator <u>Marbob Energy Corporation</u>		
Address <u>P.O. Drawer 217, Artesia, NM 88210</u>		
Reason(s) for filing (Check proper box)		
<input type="checkbox"/> New Well	Change in Transporter of:	Other (Please explain)
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	Change of Operator dated effective
<input checked="" type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	April 1, 1990 at 7:00 am
<input type="checkbox"/> Dry Gas	<input type="checkbox"/> Condensate	

If change of ownership give name and address of previous owner  
ARCO Oil and Gas Co. P. O. Box 1610 Midland, TX 79702

## II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Fren Oil Company</u>	Well No. <u>20</u>	Pool Name, including Formation <u>Cedar Lake Abo</u>	Kind of Lease <u>State, Federal or Fee Federal</u>	Lease No. <u>LC031844</u>
Location				
Unit Letter <u>N</u> : <u>900</u> Feet From The <u>South</u> Line and <u>1980</u> Feet From The <u>West</u>				
Line of Section <u>19</u> Township <u>17 South</u> Range <u>31 East</u> <u>NMPM, Eddy</u> County				

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

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
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)	
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	Twp.	Req.
Is gas actually connected?	When	

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

NOTE: Complete Parts IV and V on reverse side if necessary.

## VI. 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 is true and complete to the best of my knowledge and belief.

Ray Miller  
(Signature)  
Secretary Treasurer  
(Title)  
3/29/90  
(Date)

## OIL CONSERVATION DIVISION

APR 17 1990

APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY MIKE WILLIAMS  
TITLE 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.

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