

District I
PO Box 1980, Hobbs, NM 88241-1980
District II
PO Drawer DD, Artesia, NM 88211-0719
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico
BY, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, NM 87504-2088

Form C-104
Revised February 10, 1994
Instructions on back
Submit to Appropriate District Office
5 Copies

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

¹ Operator name and Address Marathon Oil Company P. O. Box 1324 Artesia, NM 88210		² OGRID Number 014021
⁴ API Number	⁵ Pool Name S. Dagger Draw / Upper Penn	³ Reason for Filing Code Sell <i>200</i> Bbls Comp Drip
⁷ Property Code	⁸ Property Name MOC FEDERAL CONSOLIDATED BATTERY	⁶ Pool Code 15475
		⁹ Well Number NIBU-13

II. ¹⁰ Surface Location

UL or lot no.	Section	Township	Range	Lot. Idn	Feet from the	North/South Line	Feet from the	East/West line	County
BLK 4	1	T-21-S	23-E						EDDY

¹¹ Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot. Idn	Feet from the	North/South Line	Feet from the	East/West line	County
¹² Lse Code	¹³ Producing Method Code	¹⁴ Gas Connection Date	¹⁵ C-129 Permit Number	¹⁶ C-129 Effective Date	¹⁷ C-129 Expiration Date				

III. Oil and Gas Transporters

¹⁸ Transporter OGRID	¹⁹ Transporter Name and Address	²⁰ POD	²¹ O/G	²² POD ULSTR Location and Description
015694	Navajo Refining Co. Box 159 Artesia, NM 88210	28059055	0	NIBU-13 UL "H" S2, 21S, 23E Compressor drip for wells going into MOC FED CONSOLIDATED BATTERY

IV. Produced Water

²³ POD	²⁴ POD ULSTR Location and Description

V. Well Completion Data

²⁵ Spud Date	²⁶ Ready Date	²⁷ TD	²⁸ PBTD	²⁹ Perforations
³⁰ Hole Size	³¹ Casing & Tubing Size	³² Depth Set	³³ Sacks Cement	

VI. Well Test Data

³⁴ Date New Oil	³⁵ Gas Delivery Date	³⁶ Test Date	³⁷ Test Length	³⁸ Tbg. Pressure	³⁹ Csg. Pressure
⁴⁰ Choke Size	⁴¹ Oil	⁴² Water	⁴³ Gas	⁴⁴ AOF	⁴⁵ Test Method

⁴⁶ I hereby certify that the rules 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: *Deanna McCoy*
Printed name: Deanna McCoy

Title: Records Processor

Date: *1/16/96* Phone: 1/505/457/2621

Approved by:

OIL CONSERVATION DIVISION
ORIGINAL SIGNED BY TIM W. GUM
DISTRICT II SUPERVISOR

Approval Date:

JAN 23 1996

⁴⁷ If this is a change of operator fill in the OGRID number and name of the previous operator

Previous Operator Signature

Printed Name

Title

IF THIS IS AN AMENDED REPORT, CHECK THE BOX LABELED
"AMENDED REPORT AT THE TOP OF THIS DOCUMENT"

Report all gas volumes at 15.025 PSIA at 60°.

A request for allowable for a newly drilled or decommissioned well must be accompanied by a tabulation of the deviation logs conducted in accordance with Rule 11.

All sections of this form must be filled out for all wells requests on new and recommissioned wells.

Fill out only sections I, II, III, IV, and the operator certifications for changes of operator, property name, well number, diameter, or other such changes.

A separate C-104 must be filled for each pool in a multiple completion.

Improperly filled out or incomplete forms may be returned to operators unapproved.

Operator's name and address

Operator's OGRID number. If you do not have one it will be assigned and filled in by the District office.

Reason for filling code from the following table:

RT Request for test allowable (include volume requested)
CO Change gas transporter
AG Add gas transporter
CO Change oil/gasless transporter
AO Add oil/gasless transporter
CH Change of Operator
RC Recommendation
NW New Well

The API number of the well

The name of the pool for this completion

The pool code for this pool

The property code for this completion

The property name (well name) for this completion

The well number for this completion

The surface location of the completion NOTE: If the United States government survey designates a Lot Number for the location use that number in the UL or lot no. box. Otherwise use the OGD unit letter.

The bottom hole location of this completion

Lease code from the following table:

F Federal
S State
P Private
J Judicial
N Navajo
U Ute Mountain Ute
I Other Indian Tribe

The producing method code from the following table:

P Pumping or other artificial lift
F Flowing

MODA/YR that this completion was first connected to a gas transporter

The permit number from the District approves C-129 for this completion

MODA/YR of the C-129 approval for this completion

MODA/YR of the expiration of C-129 approval for this completion

The gas or oil transporter's OGRID number

Name and address of the transporter of the product

The number assigned to the POD from which this product will be transported by this transporter. If this is a new well or recommissioned by this transporter, it has no number in the district office well assign a number and write it here.

Product code from the following table:

0 Oil
G Gas

The ULSTR location of this POD if it is different from the well completion location and a short description of the POD (Example: "Battery A", "Jones CPD", "also")

The POD number of the storage from which water is moved from the property. If this is a new well or recommission and from the POD has no number the district office will assign a number and write it here.

The ULSTR location of the POD if it is different from the well completion location and a short description of the POD (Example: "Battery A Water Tank", "Jones CPD Water Tank", etc.)

MODA/YR during completion

MODA/YR this completion was ready to produce

Total vertical depth of the well

Plugback vertical depth

Top and bottom perforation in this completion or casing shoe and TD if operate

Inside diameter of the well bore

Outside diameter of the casing and tubing

Depth of casing and tubing. If a casing liner show top and bottom.

Number of sacks of cement used per casing string

The following test data is for an oil well it must be from a test conducted only after the total volume of load oil is recovered.

MODA/YR that new oil was first produced

MODA/YR that gas was first produced into a pipeline

MODA/YR that the following test was completed

Length in hours of the test

Flowing tubing pressure - oil wells

Shut-in tubing pressure - gas wells

Flowing casing pressure - oil wells

Shut-in casing pressure - gas wells

Diameter of the choke used in the test

Barrels of oil produced during the test

Barrels of water produced during the test

MCF of gas produced during the test

Gas well calculated absolute open flow in MCF/D

The method used to test the well:

F Flowing
P Pumping
S Swabbing
If other method please write it in.

The signature, printed name, and title of the person authorized to make this report, the date this report was signed, and the telephone number to call for questions about this report

The previous operator's name, the signature, printed name, and title of the previous operator, a representative authorized to verify that the previous operator no longer operates this completion, and the date this report was signed by that person