

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

FILE	
LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
PRODUCTION OFFICER	

Marathon Oil Company

Address P. O. Box 2409 Hobbs, New Mexico 88240

Reason(s) for filing (Check proper box)

New Well	<input type="checkbox"/>	Change in Transporter of:		Other (Please explain)
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>	Downhole commingled Vacuum Glorieta and Vacuum Blinebry.
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

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease
McCallister State	6	Vacuum Glorieta & Blinebry	State, Federal or Fee	B-27
Location	State			
Unit Letter	West			
L	1650 Feet From The South Line and 660 Feet From The West			
Line of Section	Township	Range	NMPM, Lea	
25	17S	34E		

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Mobil Pipeline	Box 900 1st Int'l Bldg. Dallas, TX 7522
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Phillips Petroleum Co. GPM Gas Corporation	4001 Penbrook Odessa, TX 79763
Is gas actually connected?	When
Yes	6-4-63
If well produces oil or liquids, give location of tanks.	DHC #515

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff
(X)								
Date Spudded	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.				
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay		Tubing Depth				
Perforations	Depth Casing Shoe							

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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 able 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.)	
9-22-84	9-23-84	Pumping	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hours	40	40	-
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
120 bbls.	40	80	66

GAS WELL		Bbls. Condensate/MCF	Gravity of Condensate
Actual Prod. Test-MCF/D	Length of Test		
Testing Method (pilot, back pr.)	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.

*Steven A. Pohler*  
Steven A. Pohler  
(Signature)

Production Engineer

(Title)

September 25, 1984

(Date)

OIL CONSERVATION DIVISION  
SEP 27 1984

APPROVED \_\_\_\_\_, 19\_\_

BY ORIGINAL SIGNATURE BY \_\_\_\_\_  
INSTRUMENTAL SIGNATURE

TITLE \_\_\_\_\_

This form is to be filed in compliance with RULE 110. If this is a request for allowable for a newly drilled or well, this form must be accompanied by a tabulation of the tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes well name or number, or transporter, or other such change of Separate Forms C-104 must be filed for each pool