

NO. 111-11111 RECEIVED 5

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SANTA FE

FILE

U.S.G.S.

LAND OFFICE

TRANSPORTER

OIL

GAS

OPERATOR

PRORATION OFFICE

NEW MEXICO OIL CONSERVATION COMM ON

REQUEST FOR ALLOWABLE -

AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form O-104

Supersedes Old C-104 and C-110

Effective 1-1-65

AUG 31 1976

O. C. C.

ARTESIA, OFFICE

I. Operator

MARALO, INC.

Address

P. O. BOX 832, Midland, Texas 79701

Reason(s) for filing (Check proper box)

New Well

Recompletion

Change in Ownership

Change in Transporter of:

Oil

Casinghead Gas

Dry Gas

Condensate

Other (Please explain)

Southern Union Gas Co. changed their name.

Change became effective August 1, 1976

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name

Moots Fee

Well No.

1

Pool Name, including Formation

Lake Arthur (Penn) Gas ~~Field~~

Kind of Lease

State, Federal or Fee

Fee

Location

Unit Letter

L

Feet From The

660

West

Line and

1980

Feet From The

South

Line of Section

31

Township

15-S

Range

27-E

NMPM,

Chaves

County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil

Summit Gas Co.

Address (Give address to which approved copy of this form is to be sent)

2510 W. Front, Midland, Texas 79701

Name of Authorized Transporter of Casinghead Gas

Gas Company of New Mexico

Address (Give address to which approved copy of this form is to be sent)

First International Bldg., Dallas, Texas 75270

If well produces oil or liquids, give location of tanks.

Unit

L

Sec.

31

Twf.

15S

Rge.

27E

Is gas actually connected?

Yes

When

January, 1963

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

V. COMPLETION DATA

Designate Type of Completion - (X)

Oil Well

Gas Well

New Well

Workover

Deepen

Plug Back

Same Res'v.

Diff. Res'v.

Date Spudded

Date Compl. Ready to Prod.

Total Depth

F.B.T.D.

Pool

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

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.)

Length of Test

Tubing Pressure

Casing Pressure

Choke Size

Actual Prod. During Test

Oil - Bbls.

Water - Bbls.

Gas - MCF

GAS WELL

Actual Prod. Test-MCF/D

Length of Test

Bbls. Condensate/MMCF

Gravity of Condensate

Testing Method (pitot, back pr.)

Tubing Pressure

Casing Pressure

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.

Production Clerk

August 30, 1976

OIL CONSERVATION COMMISSION

SEP 2 1976

APPROVED

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 Sections I, II, III, and VI only 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.

