DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE TRANSPORTER OPERATOR PRORATION OFFICE	NEW MEXICO OIL O REQUEST AUTHORIZATION TO TRA
Operator Marbob Energy Address	Corporation
P. O. Box 304, Reason(s) for filing (Check proper box, New We!! Recompletion Change in Ownership If change of ownership give name and address of previous owner	Change in Transporter of: Oil Dry G Casinghead Gas Conde
DESCRIPTION OF WELL AND	
N. G. Phillips-State Location	4 Artesia (50 Feet From The South Line
Unit Letter :	
DESIGNATION OF TRANSPORT Name of Authorized Transporter of Oil Name of Authorized Transporter of Cas	or Condensate Condensa
DESIGNATION OF TRANSPORT Name of Authorized Transporter of Oil Name of Authorized Transporter of Cas If well produces oil or liquids, give location of tanks.	or Condensate or
DESIGNATION OF TRANSPORT Name of Authorized Transporter of Oil Name of Authorized Transporter of Cas If well produces oil or liquids, give location of tanks. If this production is commingled with COMPLETION DATA	or Condensate or pool, TUnit Sec. Twp. P.ge.
DESIGNATION OF TRANSPORT Name of Authorized Transporter of Oil Name of Authorized Transporter of Cas If well produces oil or liquids, give location of tanks. If this production is commingled with	or Condensate or Dry Gas Tunit Sec. Twp. Rge.
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DESIGNATION OF TRANSPORT Name of Authorized Transporter of Oil Name of Authorized Transporter of Cas If well produces oil or liquids, give location of tanks. If this production is commingled with COMPLETION DATA Designate Type of Completion Date Spudded	or Condensate or Dry Gas Tunit Sec. Twp. Rge. That from any other lease or pool, On - (X) Date Compl. Ready to Prod.
DESIGNATION OF TRANSPORT Name of Authorized Transporter of Oil Name of Authorized Transporter of Oil If well produces oil or liquids, give location of tanks. If this production is commingled with COMPLETION DATA Designate Type of Completion Date Spudded Elevations (DF, RKB, RT, GR, etc.)	or Condensate or Condensate singhead Gas [*] or Dry Gas Unit Sec. Twp. Rge. th that from any other lease or pool, on — (X) Date Compl. Ready to Prod. Name of Producing Formation
DESIGNATION OF TRANSPORT Name of Authorized Transporter of Oil Name of Authorized Transporter of Cas If well produces oil or liquids, give location of tanks. If this production is commingled with COMPLETION DATA Designate Type of Completion Date Spudded Elevations (DF, RKB, RT, GR, etc.) Perforations	or Condensate or Condensate uninghead Gas [17] or Dry Gas Unit Sec. Twp. Rge. In that from any other lease or pool, on - (X) Date Compl. Ready to Prod. Name of Producing Formation TUBING, CASING, AN
DESIGNATION OF TRANSPORT Name of Authorized Transporter of Oil Name of Authorized Transporter of Cas If well produces oil or liquids, give location of tanks. If this production is commingled with COMPLETION DATA Designate Type of Completion Date Spudded Elevations (DF, RKB, RT, GR, etc.) Perforations HOLE SIZE TEST DATA AND REQUEST FOOIL WELL	or Condensate or Condensate linghead Gas or Dry Gas linghead Gas or Dry Gas Unit Sec. Twp. Rge. That from any other lease or pool, on — (X) Date Compl. Ready to Prod. Name of Producing Formation TUBING, CASING, AN CASING & TUBING SIZE OR ALLOWABLE (Test must be able for this desired)
DESIGNATION OF TRANSPORT Name of Authorized Transporter of Oil Name of Authorized Transporter of Oil Name of Authorized Transporter of Cas If well produces oil or liquids, give location of tanks. If this production is commingled with COMPLETION DATA Designate Type of Completion Date Spudded Elevations (DF, RKB, RT, GR, etc.) Perforations HOLE SIZE TEST DATA AND REQUEST FOOIL WELL Date First New Oil Run To Tanks	or Condensate or Condensate linghead Gas [*] or Dry Gas Unit Sec. Twp. Rge. th that from any other lease or pool, on — (X) Oil Well Gas Well on — (X) Date Compl. Ready to Prod. Name of Producing Formation TUBING, CASING, AN CASING & TUBING SIZE OR ALLOWABLE (Test must be able for this desired)
DESIGNATION OF TRANSPORT Name of Authorized Transporter of Oil Name of Authorized Transporter of Cas If well produces oil or liquids, give location of tanks. If this production is commingled with COMPLETION DATA Designate Type of Completion Date Spudded Elevations (DF, RKB, RT, GR, etc.) Perforations HOLE SIZE TEST DATA AND REQUEST FOOIL WELL	or Condensate or Condensate inghead Gas or Dry Gas Unit Sec. Twp. P.ge. th that from any other lease or pool, Oil Well Gas Well Date Compl. Ready to Prod. Name of Producing Formation TUBING, CASING, AN CASING & TUBING SIZE OR ALLOWABLE (Test must be able for this decay)
DESIGNATION OF TRANSPORT Name of Authorized Transporter of Oil Name of Authorized Transporter of Oil Name of Authorized Transporter of Cas If well produces oil or liquids, give location of tanks. If this production is commingled with COMPLETION DATA Designate Type of Completion Date Spudded Elevations (DF, RKB, RT, GR, etc.) Perforations HOLE SIZE TEST DATA AND REQUEST FOOIL, WELL Date First New Oil Run To Tanks Length of Test	or Condensate or Condensate linghead Gas [*] or Dry Gas Tunit Sec. Twp. Rge. th that from any other lease or pool, on - (X) Date Compl. Ready to Prod. Name of Producing Formation TUBING, CASING, AN CASING & TUBING SIZE OR ALLOWABLE (Test must be able for this decended by the condensation) Date of Test Tubing Pressure
DESIGNATION OF TRANSPORT Name of Authorized Transporter of Oil Name of Authorized Transporter of Oil Name of Authorized Transporter of Cas If well produces oil or liquids, give location of tanks. If this production is commingled with COMPLETION DATA Designate Type of Completion Date Spudded Elevations (DF, RKB, RT, GR, etc.) Perforations HOLE SIZE TEST DATA AND REQUEST FOOIL WELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test GAS WELL	or Condensate or

(Signature)

(Title)

(Date)

September 16, 1974

ONSERVATION COMMISSION

Form C-104

FILE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-1. Effective 1-1-65		
U.S.G.S.	AUTHORIZATION TO TO	AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
LAND OFFICE		AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
TRANSPORTER OIL GAS	_	RECEIVED			
OPERATOR ?	SEP 1 7 1974				
PRORATION OFFICE Operator	<u> </u>	00.1			
Marbob Energy Address	Corporation /	orporation O.C.C.			
P. O. Box 304	, Artesia, New Mexico 882				
Reason(s) for filing (Check proper bos	()	Other (Please explain)			
New Well	Change in Transporter of:				
Recompletion	Oil Dry Go	rs []			
Change in Ownership	Casinghead Gas Conder	sate Effective 9	-1-74		
f change of ownership give name and address of previous owner	John R. Gray, P. O. Box	1046, Artesia, New Me.	xico		
DESCRIPTION OF WELL AND	LEASE Well No. Pool Name, Including F	ormation Kind of Le	case Lease No.		
N. G. Phillips-State	4 Artesia (Q G SA) State, Fed	eral or Fee State B-2071		
Location					
Unit Letter I ; 10	650 Feet From The South Lin	e and 330 Feet Fro	om The <u>East</u>		
Line of Section 27 To	wnship 178 Range	28E , nmpm,	Eddy County		
ADDIONATION OF TRANSPOR	TED OF OH AND MARKIDAT CA	.c			
Name of Authorized Transporter of Oi	TER OF OIL AND NATURAL GA		proved copy of this form is to be sent)		
(1) atering	ection Well.				
Name of Authorized Transporter & Co	singhead Gas [] or Dry Gas	Address (Give address to which ap	proved copy of this form is to be sent)		
	Unit Sec. Twp. Rge.	Is gas actually connected?	When		
If well produces oil or liquids, give location of tanks.	Two inge	is gas actually commercial.	······		
· · · · · · · · · · · · · · · · · · ·	ith that from any other lease or pool,	give commingling order number:	t.		
COMPLETION DATA					
Designate Type of Completi	on - (X) Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v		
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		
	TURING CASING AND	CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a	fter recovery of total volume of load	oil and must be equal to or exceed top allo		
OIL WELL Date First New Oil Run To Tanks	able for this de	pth or be for full 24 hours) Producing Method (Flow, pump, gas	lift, etc.)		
Date titet New Oil Han 10 1 mira	24.0 0.1 1.2.1				
Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
Actual Prod. During Test	Oil-Bbis.	Water - Bbls.	Gas - MCF		
O A O LIVEY Y					
GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate		
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size		
CERTIFICATE OF COMPLIAN	ICF.	OIL CONSER	OIL CONSERVATION COMMISSION		
CERTIFICATE OF COMPLIAN		SED 24			
I hereby certify that the rules and	regulations of the Oil Conservation	11 77 170 4 20 7	/		
Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		BY OIL AND GAS INSPECTOR			
//. / /		This form is to be filed in compliance with RULE 1104.			

In its form is to be fired 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