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|                        | GAS 1 |
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| PRODUCTION OFFICE      |       |

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supp. 1-101 and 1-102  
Effective 1-1-85

JUL 25 1980

O. C. D.  
ARTESIA, OFFICE

|                                                     |                                                                             |
|-----------------------------------------------------|-----------------------------------------------------------------------------|
| Operator<br><b>Marbob Energy Corporation</b>        |                                                                             |
| Address<br><b>P.O. Box 304, Artesia, N.M. 88210</b> |                                                                             |
| Reason(s) for filing (Check proper box)             |                                                                             |
| New Well <input checked="" type="checkbox"/>        | Change in Transporter of:                                                   |
| Recompletion <input type="checkbox"/>               | Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>               |
| Change in Ownership <input type="checkbox"/>        | Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> |

If change of ownership give name and address of previous owner \_\_\_\_\_

|                                 |                        |                            |                                                               |                                                        |                            |
|---------------------------------|------------------------|----------------------------|---------------------------------------------------------------|--------------------------------------------------------|----------------------------|
| Lease Name<br><b>Walker St.</b> |                        | Well No.<br><b>3</b>       | Pool Name, Including Formation<br><b>East Empire Yates SR</b> | Kind of Lease<br>State, Federal or Fee<br><b>State</b> | Lease No.<br><b>B-2071</b> |
| Location                        |                        |                            |                                                               |                                                        |                            |
| Unit Letter<br><b>0</b>         | <b>370</b>             | Feet From The <b>South</b> |                                                               | Line and<br><b>2287.6</b>                              | Feet From The <b>East</b>  |
| Line of Section<br><b>27</b>    | Township<br><b>17S</b> | Range<br><b>28E</b>        | , N.M.P.M., <b>Eddy</b>                                       |                                                        | County                     |

|                                                                                                                                                               |                  |                   |                                                                                                                         |                    |                                                           |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|-------------------|-------------------------------------------------------------------------------------------------------------------------|--------------------|-----------------------------------------------------------|
| DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS                                                                                                             |                  |                   |                                                                                                                         |                    |                                                           |
| Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/><br><b>Navajo Crude Oil Purchasing Co.</b>    |                  |                   | Address (Give address to which approved copy of this form is to be sent)<br><b>P.O. Drawer 175, Artesia, N.M. 88210</b> |                    |                                                           |
| Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/><br><b>Phillips Petroleum Company</b> |                  |                   | Address (Give address to which approved copy of this form is to be sent)<br><b>4001 Penbrook, Odessa, Texas 79760</b>   |                    |                                                           |
| If well produces oil or liquids, give location of tanks.                                                                                                      | Unit<br><b>0</b> | Sec.<br><b>27</b> | Twp.<br><b>17S</b>                                                                                                      | Rge.<br><b>28E</b> | Is gas actually connected? <b>Yes</b> When <b>7/20/80</b> |

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

|                                                        |                                                                                                                                                                                                                                                                           |                                |                                         |
|--------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|-----------------------------------------|
| COMPLETION DATA                                        |                                                                                                                                                                                                                                                                           |                                |                                         |
| Designate Type of Completion - (X)                     | Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> New Well <input checked="" type="checkbox"/> Workover <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Staircase Rest. <input type="checkbox"/> |                                |                                         |
| Date Spudded<br><b>7/7/80</b>                          | Date Compl. Ready to Prod.<br><b>7/20/80</b>                                                                                                                                                                                                                              | Total Depth<br><b>1040'</b>    | P.B.T.D.<br><b>1011'</b>                |
| Elevations (DF, RKB, RT, GR, etc.)<br><b>3440' GR</b>  | Name of Producing Formation<br><b>Seven Rivers</b>                                                                                                                                                                                                                        | Top Oil/Gas Pay<br><b>828'</b> | Tubing Depth<br><b>870'</b>             |
| Perforations<br><b>828'-832', 838'-842', 846'-850'</b> |                                                                                                                                                                                                                                                                           |                                | Depth Casing Shoe<br><b>1040'</b>       |
| TUBING, CASING, AND CEMENTING RECORD                   |                                                                                                                                                                                                                                                                           |                                |                                         |
| HOLE SIZE<br><b>11"</b>                                | CASING & TUBING SIZE<br><b>8 5/8" 24#</b>                                                                                                                                                                                                                                 | DEPTH SET<br><b>80'</b>        | SACKS CEMENT<br><b>3 yds. ready mix</b> |
| <b>7 7/8"</b>                                          | <b>4 1/2" 10.50#</b>                                                                                                                                                                                                                                                      | <b>1040'</b>                   | <b>250 sack</b>                         |
|                                                        | <b>2 3/8"</b>                                                                                                                                                                                                                                                             | <b>870'</b>                    |                                         |

|                                                                                                                                                                                       |                                |                                                              |                                 |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|--------------------------------------------------------------|---------------------------------|
| 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 able for this depth or be for full 24 hours) |                                |                                                              |                                 |
| Date First New Oil Run To Tanks<br><b>7/20/80</b>                                                                                                                                     | Date of Test<br><b>7/22/80</b> | Producing Method (Flow, pump, gas lift, etc.)<br><b>Pump</b> |                                 |
| Length of Test<br><b>24 hrs.</b>                                                                                                                                                      | Tubing Pressure<br><b>20#</b>  | Casing Pressure<br><b>20#</b>                                | Choke Size<br><b>100/100</b>    |
| Actual Prod. During Test<br><b>8 bbl.</b>                                                                                                                                             | Oil - Bbls.<br><b>4</b>        | Water - Bbls.<br><b>4</b>                                    | Gas - MCF<br><b>To pipeline</b> |

|                                 |                           |                           |                       |
|---------------------------------|---------------------------|---------------------------|-----------------------|
| GAS WELL                        |                           |                           |                       |
| Actual Prod. Test-MCF/D         | Length of Test            | Bbls. Condensate/MMCF     | Gravity of Condensate |
| Testing Method (flow, back pr.) | Tubing Pressure (shut-in) | Casing Pressure (shut-in) | Choke Size            |

STATEMENT 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.

*Carolyn Quinn*  
(Signature)  
Production Clerk  
(Title)  
7/24/80

OIL CONSERVATION COMMISSION  
JUL 29 1980

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

BY *Mike Williams*

TITLE **OIL AND GAS INSPECTOR**

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 well test data taken on the well in accordance with RULE 111.

All portions of this form must be filled out completely for all wells on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of ownership or other such change of record.

