State of New Mexico Form C.JUC ¹¹ Submit 3 Copies Energy, Minerals and Natural Resources Department Form C.JUC ¹¹ District Office Energy, Minerals and Natural Resources Department RECENTED District Office P.O. Box 1900, Hobs, NM 88240 OIL CONSERVATION DIVISION NOV ~ 5 1992 District Office P.O. Box 2088 NOV ~ 5 1992 P.O. Drawer DD, Attein, NM 88210 Santa Fe, New Mexico 87504-2088 O.C. D. District Office TO TRANSPORT OIL AND NATURAL GAS O.C. D. Operator Male and the state office Well API No. Marbob Energy Corporation Well API No. Well API No. Address P. O. Drawer 217, Artesia, NM 88210 B8210 Recompteion Change in Transporter of. Effective 11/1/92 Recompteion Cold Dry Gas Cold It drange of periodr give name Phillips Petroleum Company, 4001 Penbrook, Odessa, TX 79762 Lease No. It drange of operiodr give name Phillips Petroleum Company, 4001 Penbrook, Odessa, TX 12/C-028784 (It drange of operiod give name Phillips Petroleum Company, 4001 Penbrook, 0dessa, TX 12/C-028784 (It deare of Auborids Transporter O OI Cold Greadess I Backin the perro
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IV. COMPLETION DATA Oil Well Gas Well New Well Workover Deepen Plug Back Same Res'v Diff F
Designate Type of Completion - (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
Depth Casing Shoe
Perforations
TUBING, CASING AND CEMENTING RECORD
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT
11-20-92
chq. p.
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.)
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Casing Pressure Choke Size
Length of Test
Actual Prod. During Test Oil - Bbls. Water - Bbls. Gas- MCl [*]
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Division have been complied with and that the information given accreding the addition to the best of my knowledge and belief. Date Approved NOV 1 0 1992
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INSTRUCTIONS: This form is to be filed in compliance with Rule 1104 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance

All sections of this form must be filled out for allowable on new and recompleted wells.
 Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
 Separate Form C-104 must be filed for each pool in multiply completed wells.