

STATE OF NEW MEXICO  
OIL AND NATURAL GAS DEPARTMENT

CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

RECEIVED  
JUN 02 '88

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

O. C. D.  
ARTESIA, OFFICE

Marbob Energy Corporation

Address  
P.O. Drawer 217, Artesia, New Mexico 88210

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)  
Change in well name from: State BE #1  
to: Texaco BE #1  
Effective June 1, 1988

Change of ownership give name and address of previous owner: TEXACO Producing Inc., P. O. Box 728, Hobbs, NM 88240

DESCRIPTION OF WELL AND LEASE

Lease Name  
Texaco BE

Well No.  
1

Pool Name, Including Formation  
Grbg Jackson SR Q Grbg SA

Kind of Lease  
State, Federal or Fee State

Lease No.  
B-1565

Location

Unit Letter B : 990 Feet From The North Line and 2310 Feet From The East

Line of Section 16 Township 17S Range 30E, NMPM, Eddy County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐  
Texas New Mexico Pipeline Co.

Address (Give address to which approved copy of this form is to be sent)  
P. O. Box 2528, Hobbs, NM 88240

Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐  
Conoco, Inc.

Address (Give address to which approved copy of this form is to be sent)  
P. O. Drawer 1267, Ponca City, OK 74603

Well produces oil or liquids,  
give location of tanks.

Unit  
B

Sec.  
16

Twp.  
17S

Rge.  
30E

Is gas actually connected?  
Yes

When  
11/21/72

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 ☐ 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.

Deviations (DF, RKH, 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  
Part ID-3  
6-10-88  
chg up & well name

TEST DATA AND REQUEST FOR ALLOWABLE

(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)

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

Total Prod. During Test

Oil-Bbls.

Water-Bbls.

Gas-MCF

SHUT-IN WELL

Total Prod. Test-MCF/D

Length of Test

Bbls. Condensate/MCF

Gravity of Condensate

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 is true and complete to the best of my knowledge and belief.

Rhonda Nelson

(Signature)

Production Clerk

(Title)

6/1/88

(Date)

OIL CONSERVATION DIVISION

APPROVED JUN 9 1988, 19

BY Original Signed By  
Mike Williams

TITLE Oil & 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 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 completed wells.