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Appropriate District Office
DISTRICT 1 P.O. Box 1980, Hobbs, NM 88240 DISTRICT II P.O. Drawer DD, Antesia, NM 88210

## State of New Mexico

Energy, Minerals and Natural Resources Department

KECLIVED

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

OIL CONSERVATION DIVISION

P.O. Box 2088 Santa Fe, New Mexico 87504-2088 O. C. D.

NOV 7 5 1992

TO TRANSPORT OIL AND NATURAL GAS  Well ARING.  Marcho Energy Corporation  Anabob Energy Corporation  P. O. Drawer 217, Artesia, MR 88210  Example for Ting (Check respective)  Change in Joyce and Dry Cas   Checken   Checken   Checken   Checken   Change in Joyce and Dry Cas   Checken   Change in Joyce and Dry Cas   Checken   Change in Joyce and Dry Cas   Change in Joyce and Subras of previous genatic   Location   Dry Cas   Change in Joyce and J	DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410	REQU	JEST F	OR AL	LOWAE	BLE AND	AUTHORI	ZATION				
Marbob Energy Corporation  Marbot Strain Condition  Marbot Flag (Card proper bas)  Remorbides   Call Card proper bas)  Remorbides   Call Card proper bas    Remorbides   Call Pro								AS .	- FI-K1			
P. O. Drawer 2477, Artesia, N. 88210  Canage in Great proper loss   Canage in Grange in Transporter of Clauge in Transporter of Clauge in Grange i	Operator  Marbob Energy Corpor	ation						Well /	\1'1 No.			
Case   Direct   Private explainty   Case   Direct   Direct   Private explainty   Case   Direct   Dir	Address P. O. Drawer 217, Ar	tesia,	NM 8	8210								
Content   December   Content   December   Content   December   Content   December   Content   December   Content   December   Dece	Reason(s) for Filing (Check proper box)					Oth	er (Please explo	sin)				
Cases in Operator	New Well		Change in	-		Ef	fective	11/1/92				
Company   Comp	Recompletion	- '		-								
IL DESCRIPTION OF WELL AND LEASE   New Name, Including Formalion   New York	CHANGE III O PRESENT							Odoga	o TV 70	762		
Lists Nime SURCH BE FEDERAL  2 CREG JACKSON SR Q GRBG SA  3 CREG JACKSON SR Q GRBG SA  4 CREG JACKSON S				leum	Compan	y, 4001_	Penbrook	, odessa	a, 1A /9	702	•	
Location   Letter   K   1980   Feel From The   S   Lias and   1984   Peet From The   M   Line   Section   18   Tevenship   Total From The   Section   18   Tevenship   Total	Lease Name	ase Name			ine, Includi	., B						
Duli Letter   K			22	GRBG	JACKSC	JN SK Q	GRBG SA	NAPE,	T COCIAT ONLYER	16-02	0704 73(1)	
Section Township PRAISE Note 1 Range NOTES   Section   Note   Note   Notes   N	K	:19	980	Feet Fro	n The	Line	e and198	84 Fe	et From The _	W	Line	
Name of Authorized Transporter of Gil Analysis of Coordensate WALLA REPEINING COMPANY  Name of Authorized Transporter of Casinghead Gas or Dry Gas Addition (Give address to which approved copy of this form is to be sent)  Find Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent)  GOI Well Gas CORPORATION  If well produces oil or liquids, we location of tanks.  Use in production is committinglied with that from any other lease or pool, give contralingling order number:  IV. COMPLETION DATA  Designate Type of Completion - (X)  Date Compl. Ready to Prod.  Date Compl. Ready to Prod.  Date Compl. Ready to Prod.  Total Depth  P. B.T.D.  Tubing Depth  P. B.T.D.  Tubing Depth  P. B.T.D.  Tubing Depth  Tubing Depth  Tubing Depth  P. B.T.D.  Tubing Depth  Tubing Depth Depth Carling Shoop  Tubing Depth Carling Shoop  Tubing Depth Carling Shoop  Tubing Depth Depth Carling Shoop  Tubing Depth Car	Section 18 Township		17S	Range		30E , N	мрм,		EDDY		County	
Name of Authorized Transporter of Gil Analysis of Coordensate WALLA REPEINING COMPANY  Name of Authorized Transporter of Casinghead Gas or Dry Gas Addition (Give address to which approved copy of this form is to be sent)  Find Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent)  GOI Well Gas CORPORATION  If well produces oil or liquids, we location of tanks.  Use in production is committinglied with that from any other lease or pool, give contralingling order number:  IV. COMPLETION DATA  Designate Type of Completion - (X)  Date Compl. Ready to Prod.  Date Compl. Ready to Prod.  Date Compl. Ready to Prod.  Total Depth  P. B.T.D.  Tubing Depth  P. B.T.D.  Tubing Depth  P. B.T.D.  Tubing Depth  Tubing Depth  Tubing Depth  P. B.T.D.  Tubing Depth  Tubing Depth Depth Carling Shoop  Tubing Depth Carling Shoop  Tubing Depth Carling Shoop  Tubing Depth Depth Carling Shoop  Tubing Depth Car	III DESIGNATION OF TRANS	SPORTE	R OF O	IL ANI	D NATU	RAL GAS						
GPM GAS CORPORATION  If well produces oil of liquids, price produces of pool, give contained that from any other lease or pool, give contained that give location of the data.  If his production is commispled with that from any other lease or pool, give containing this grass actually connected?  When 7 yee to be producted in the price production of the	NAVAJO REFINING COMPANY or Condensate						P. O. BOX 159, ARTESIA, NM 88210					
TUBING, CASING AND CEMENTING RECORD  HOLE SIZE  CASING & TUBING SIZE  OIL WELL  (Test must be after receivery 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 Fire New Oil Run To Tank  Length of Test  Tubing Pressure  Casing Pressure  Casing Pressure  Casing Pressure  Choke Size  GAS WELL  Actual Prod. During Test  Oil - Bibis.  GAS WELL  Actual Prod. During Test  Oil - Bibis.  GAS WELL  Actual Prod. During Test  Oil - Bibis.  GAS WELL  Actual Prod. During Test  Oil - Oil - Clerk  Incorda Nei Soon  Production Clerk  Incorda Name  Title  SUPERVISOR, DISTRICT #	Name of Authorized Transporter of Casinghead Gas					Address (Give address to which approved copy of this form is to be sent) 4001 PENBROOK, ODESSA, TX 79762						
Designate Type of Completion - (X)  Date Spudded  Date Compl. Ready to Prod.  Date Spudded  Date Compl. Ready to Prod.  Date Spudded  Date Compl. Ready to Prod.  Total Depth  P.B.T.D.  Tubing Depth  Depth Casing Shoe  TUBING, CASING AND CEMENTING RECORD  HOLE SIZE  CASING & TUBING SIZE  DEPTH SET  SACKS CEMENT  CASING & TUBING SIZE  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 Tank  Date of Test  Tubing Pressure  Casing Pressure  Casing Pressure  Casing Pressure  Choke Size  Choke Size  OIL -Bbis.  Gas-MCF  Supplied Test -MCP/D  Length of Test  Tubing Pressure (Shut-in)  Tubing Pressure (Shut-in)  Choke Size  OIL CONSERVATION DIVISION  Date Approved  NOV 1 6 1992  By ORIGINAL SIGNED BY  MIKE WILLIAMS  Title  Title  Title  Title  Title  Title  Title  Title  SUPERVISOR, DISTRICT #	If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	is gas actuali	y connected?	When	7			
Designate Type of Completion - (X)  Date Spudded  Date Compl. Ready to Prod.  Total Depth  P.B.T.D.  Total Depth  P.B.T.D.  Total Depth  P.B.T.D.  Total Depth  P.B.T.D.  Tubing Depth  Depth Casing Sluce  TUBING, CASING AND CEMENTING RECORD  HOLE SIZE  CASING & TUBING SIZE  DEPTH SET  SACKS CEMENT  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 Tank  Date of Test  Tubing Pressure  Casing Pressure  Choke Size  GAS WELL  Actual Prod. Test. MCP/D  Length of Test  Tubing Pressure (Shut-in)  Tubing Pressure (Shut-in)  Casing Pressure (Shut-in)  Casing Pressure (Shut-in)  Cloke Size  OIL CONSERVATION DIVISION  Date Approved  NOV 1 1 1992  By ORIGINAL SIGNED BY  MIKE WILLIAMS  Title  Finited Name  Title  Title  Finited Name  Title  Title  Title  Title  Title  Title  Title  SUPERVISOR, DISTRICT #  Title  Title  Title  Title  Title  SUPERVISOR, DISTRICT #  Title  SUPERVISOR, DISTRICT #	If this production is commingled with that for IV. COMPLETION DATA	rom any oli	ier lease or	pool, give	e commingl							
Date Spedded  Date Compt. Ready to Prod.  Elevations (DF, RKB, RI, GR, etc.)  Name of Producing Formation  Top Old/Gas Pay  Tubing Depth  Depth Casing Shoe  TUBING, CASING AND CEMENTING RECORD  HOLE SIZE  CASING A TUBING SIZE  DEPTH SET  SACKS CEMENT  OLD CASING A TUBING SIZE  DEPTH SET  SACKS CEMENT  OLD CASING A TUBING SIZE  OLD CASING A TUBING SIZE  OLD CASING A TUBING SIZE  DEPTH SET  SACKS CEMENT  OLD CASING A TUBING SIZE  OLD CASING A TUBING SIZE  OLD CASING A TUBING SIZE  DEPTH SET  SACKS CEMENT  OLD CASING A TUBING SIZE  Casing Pressure  Choke Size  OLD CASING A TUBING SIZE  TUBING A TUBING SIZE	Designate Type of Completion	· (X)	Oil Well	.   0	ias Well	New Well	Workover	Deepen	Plug Back  S 	Same Res'v	Diff Res'v	
TUBING, CASING AND CEMENTING RECORD  TUBING, CASING AND CEMENTING RECORD  HOLE SIZE  CASING & TUBING SIZE  DEPTH SET  SACKS CEMENT  OF The Company of the co	Date Spudded		pl. Ready to	Prod.		Total Depth	J	J	P.B.T.D.			
TUBING, CASING AND CEMENTING RECORD  HOLE SIZE  CASING & TUBING SIZE  DEPTH SET  SACKS CEMENT  OLD THE SET  SACKS CEMENT  SACKS CEMENT  OLD THE SET  SACKS CEMENT  SACKS CEMENT  OLD THE SET  SACKS CEMENT  SACK	Elevations (DF, RKB, RT, GR, etc.)  Name of Producing Formation					Top Oil/Gas	Pay		Tubing Depth			
Production Method (pitot, back pr.)  VI. OPERATOR CERTIFICATE OF COMPLIANCE Interpol Name Ringle Ri	Perforations		<del></del>		·	<u> </u>			Depth Casing	Shoe		
Production Manue  HOLE SIZE  CASING & TUBING SIZE  DEPTH SET  SACKS CEMENT  CASING THE SACKS CEMENT  Casing Pressure  Choke Size  SACKS CEMENT  Casing Pressure  Casing Pressure  (Shui-in)  Casing Pressure  (Shui-in)  Casing Pressure  (Sh			TIBING	CASIN	JG AND	CEMENTI	NG RECOR	D	<u> </u>			
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 Tank 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  Tubing Pressure (Shut-in)  Tubing Pressure (Shut-in)  Casing Pressure (Shut-in)  Casing Pressure (Shut-in)  Cloke Size  OIL CONSERVATION DIVISION  Date Approved NOV 1 0 1992  By ORIGINAL SIGNED BY MIKE WILLIAMS  Title SUPERVISOR, DISTRICT IN	HOLE SIZE					023,723,723			SA	SACKS CEMENT		
OIL WELL  (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this defin or be for full 24 mounts.)  Date of Test  Date of Test  Producing Method (Flow, pump, gas lift, etc.)  Length of Test  Casing Pressure  Casing Pressure  Choke Size  Gas-MCF  GAS WELL  Actual Prod. Test - MCF/D  Length of Test  Tubing Pressure (Shut-in)  Tubing Pressure (Shut-in)  Tubing Pressure (Shut-in)  Casing Pressure (Shut-in)  Casing Pressure (Shut-in)  Cloke Size  OIL CONSERVATION DIVISION  Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.  Signiture  Rhonda Nelson  Production Clerk  Title  Title  Title  Title  Title  Title  Title  Title  Title  SUPERVISOR, DISTRICT #  Title  Title  Title  SUPERVISOR, DISTRICT #	TOLE OIL							posted IV3				
OIL WELL  (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this defin or be for full 24 moints.)  Date First New Oil Run To Tank  Date of Test  Producing Method (Flow, pump, gas lift, etc.)  Length of Test  Casing Pressure  Choke Size  Choke Size  Gas- MCF  GAS WELL  Actual Prod. Test - MCF/D  Length of Test  Tubing Pressure (Shut-in)  Tubing Pressure (Shut-in)  Casing Pressure (Shut-in)  Casing Pressure (Shut-in)  Cloke Size  VI. OPERATOR 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 above is true and complete to the best of my knowledge and belief.  Signature  Rhonda Nelson  Production Clerk Title Title Title SUPERVISOR, DISTRICT #  Title SUPERVISOR, DISTRICT #									66000			
OIL WELL  (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this defin or be for full 24 mounts.)  Date of Test  Date of Test  Producing Method (Flow, pump, gas lift, etc.)  Length of Test  Casing Pressure  Casing Pressure  Choke Size  Gas-MCF  GAS WELL  Actual Prod. Test - MCF/D  Length of Test  Tubing Pressure (Shut-in)  Tubing Pressure (Shut-in)  Tubing Pressure (Shut-in)  Casing Pressure (Shut-in)  Casing Pressure (Shut-in)  Cloke Size  OIL CONSERVATION DIVISION  Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.  Signiture  Rhonda Nelson  Production Clerk  Title  Title  Title  Title  Title  Title  Title  Title  Title  SUPERVISOR, DISTRICT #  Title  Title  Title  SUPERVISOR, DISTRICT #										10	<del></del>	
Date First New Oil Run To Tank  Date of Test  Producing Method (Flow, pump, gas lyt, etc.)  Casing Pressure  Casing Pressure  Choke Size  Choke Size  Choke Size  Casing Pressure  Choke Size  Choke Size  Casing Pressure  Choke Size  Gas-MCF  Gas-MCF  Gas-MCF  Bbis. Condensate/MMCF  Casing Pressure (Shut-in)  Choke Size  Casing Pressure (Shut-in)  Choke Size  Casing Pressure (Shut-in)  Choke Size  OIL CONSERVATION DIVISION  Division have been complied with and that the information given above is true and complete to the best of my knowledge and betief.  Signature  Printed Name  Title  Production Clerk  Printed Name  Title  Title SUPERVISOR, DISTRICT if  Title SUPERVISOR, DISTRICT if	V. TEST DATA AND REQUES	T FOR	ALLOW	ABLE	oil and must	be equal to or	exceed top allo	owable for thi	s depth or be fo	r full 24 hou	rs.)	
Length of Test  Tubing Pressure  Casing Pressure  Choke Size  Mater - Bbls.  Gas-MCF  GAS WELL  Actual Prod. Test - MCF/D  Length of Test  Tubing Pressure (Shut-in)  Tubing Pressure (Shut-in)  Tubing Pressure (Shut-in)  Casing Pressure (Shut-in)  Casing Pressure (Shut-in)  Cloke Size  VI. OPERATOR 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 above is truff and complete to the best of my knowledge and belief.  Signiture  Rhonda Nelson  Production Clerk Pinted Name Title Title SUPERVISOR, DISTRICT #  Title SUPERVISOR, DISTRICT #	Date First New Oil Run To Tank				<del></del>	Producing M	ethod (Flow, pt	unp, gas lift, e	etc.)			
Actual Prod. During Test  Oil - Bbls.  Water - Bbls.  Gas-MCF  Gravity of Condensate  Gravity of Condensate  Gravity of Condensate  Casing Pressure (Shut-in)  VI. OPERATOR 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 above is true and complete to the best of my knowledge and belief.  Signature  Rhonda Nelson  Production Clerk Philod Name  11/2/92  Telephore No.		Tubing Pressure				Casing Press	ште	·	Choke Size	Choke Size		
GAS WELL  Actual Prod. Test - MCF/D  Festing Method (pitot, back pr.)  VI. OPERATOR 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 above is true and complete to the best of my knowledge and betief.  Signsture  Rhonda Nelson  Production Clerk Printed Name  11/2/92  748-3303  Telephone No.						Water - Bbls.			Gas- MCF			
Actual Prod. Test - MCF/D    Length of Test   Bbis. Condensate/MMCF     Casing Pressure (Shut-in)     Casing Pressure (Shut-in	Actual Prod. During Test	Oil - Bbls				(Value Bolla				<del></del>		
Tubing Pressure (Shut-in)  Casing Pressure (Shut-in)  Casing Pressure (Shut-in)  Casing Pressure (Shut-in)  Casing Pressure (Shut-in)  Clicke Size  VI. OPERATOR 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 above is true and complete to the best of my knowledge and belief.  Signature  Rhonda Nelson  Production Clerk  Printed Name  11/2/92  Talenborn No.  Title  SUPERVISOR, DISTRICT II  Title  Title  SUPERVISOR, DISTRICT II  Title						TRI II TOLLIL			TGravity of Co	ndensate		
VI. OPERATOR CERTIFICATE OF COMPLIANCE  Thereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.  Signature Rhonda Nelson Production Clerk Printed Name  11/2/92  748-3303  Title SUPERVISOR, DISTRICT IN	Actual Prod. Test - MCF/D	CF/D Length of Test				Boil, Conden	INTERIOR AND A COL					
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.  Date Approved NOV 1 6 1992  Signature Rhonda Nelson Production Clerk Printed Name Title Title Title SUPERVISOR, DISTRICT #  Title SUPERVISOR, DISTRICT #	l'esting Method (pitot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size	Choke Size		
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.  Date Approved NOV 1 6 1992  By ORIGINAL SIGNED BY  MIKE WILLIAMS  Printed Name  Title  11/2/92  748-3303  Telephone No.	I hamby certify that the rules and regula	tions of the	Oil Conser	vation			OIL CON	ISERV	ATION E	olvisio	NC	
Signature  Rhonda Nelson Production Clerk Title Printed Name 11/2/92 Telephone No.	Division have been complied with and t	hat the info	rmation giv	en above		Date	Approve	dN	OV 1 0 19	92		
Signature Rhonda Nelson Production Clerk Printed Name 11/2/92 Takeshere No.  Title SUPERVISOR, DISTRICT II	Khonda Mi	Sor	$\mathcal{L}$			    Bv	ODICIN	AL SIGN	ED BY			
Printed Name 11/2/92 Title SUPERVISOR, DISTRICT IF						MIKE WILLIAMS						
Talanhona Ma	Printed Name			Title		Title		VISOR, D	ISTRICT I			
	11/2/92 Date							· .				

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 with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
   4) Separate Form C-104 must be filed for each pool in multiply completed wells.