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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

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AUG 0 6 1993

Form C-10 Revised 1-1-89
See Instructions
at Bottom of Pag

OIL CONSERVATION DIVISION

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

DISTRICT III IVW Rio Brazos Rd., Aziec, NM 87410	ı				Mexico 875			2 (c. 96		, •	
I.	REC	UEST I	FOR	ALLOW.	ABLE AND	AUTHOR	IZATION				
Operator	/					OIL AND NATURAL GAS			TAPI No.		
Marbob Energy Corpo	ergy Corporation 🗸								015- 20668		
Address P. O. Drawer 217, A	rtesia	, NM	88210)		1 2 2 2 2		200	00	,	
Reason(s) for Filing (Check proper box)					X Ot	her (Please exp	lain)				
New Well		Change	_	porter of:		ge from I		Unit			
Recompletion	Oil		Dry (From:		C Feder	al # 31			
Change in Operator If change of operator give name	Casingh	ead Gas	Cond	lensale	Effec	tive 8/1	./93	···	· · · · · · · · · · · · · · · · · · ·		
and address of previous operator	1 8 11 2 1 1	7.407			·						
II. DESCRIPTION OF WELL LEASE NAME	uding Formation		Vind	of Lease							
Burch Keely Unit	urch Keely Unit 194 Grbg Jack								of Lease No. KFederal or Fee		
Location											
Unit Letter N.	S Line and 1980 F			eet From The	W	Line					
Section 30 Township 17S Range 30E					, NMFM, Edd			y County			
III. DESIGNATION OF TRAN	√SPORT!	ER OF C	IL AI	ND NAT	URAL GAS						
Name of Authorized Transporter of Oil	Γ-Χ -1	or Conde	nsale			e address to w	hich approved	copy of this fo	orm is to be se	ent)	
Navajo Refining Company					P. O. E	Box 159,	Artesia	, NM 828	310		
Name of Authorized Transporter of Casinghead Gas X or Dry Gas GPM Gas Corporation					Address (Give address to which approved 4001 Penbrook, Odessa,			copy of this fo	rm is to be se	nt)	
If well produces oil or liquids,	Unit	Sec.	Twp.	Rg		y connected?	Udessa, When		52		
give location of tanks.	<u>i</u>	<u>i</u>	i	Ì			When	1			
If this production is commingled with that IV. COMPLETION DATA	from any of	lier lease or	pool, g	ive comunin	gling order num	ber:					
Designate Time of Commission	GD.	Oil Wel	1	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion Date Speeded					1	<u> </u>		<u> </u>			
Date alreaded	Date Con	ipl. Ready i	o Prod.		Total Depth			P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	(F, GR, etc.) Name of Producing Formation				Top Oil/Gas	Pay	· · · · · · · · · · · · · · · · · · ·	Tubing Depth			
Perforations					Depth Casing Shoe						
	 ;										
UOI E 917E	CEMENTI		D	1							
NOLE SIZE	HOLE SIZE CASING & TUBING SIZE					DEPTH SET		SACKS CEMENT			
							Fort ID-3 8-2)-93				
							the ke man				
7. TEST DATA AND REQUEST FOR ALLOWABLE								0)	Ziesar I	
					it he equal to or	exceed top allo	wahla fon skin	damel 1 - 6-	6224	,	
Date First New Oil Run To Tank	Dale of Test				be equal to or exceed top allowable for this depth or be for full 24 hours.) Producing Method (Flow, pump, gas lift, etc.)						
ength of Test	Tubing Pressure				Casing Pressur	e		Choke Size			
Actual Prod. During Test Oil - Bbls.					Water - Bbls.			Gas-MCF			
total 1100 Daing 100	Oir - Buis.				Tratel - Dole		. }	Gas- MCP			
GAS WELL		•									
ctual Prod. Test - MCF/D	Length of Test				Bbls. Condens	IE/MMCF		Gravity of Condensate			
esting Method (pitot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size			
T OPER ATOR CERTIFICA	TE OF	COM	TAN	CE	1						
I. 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					OIL CONSERVATION DIVISION						
is true and complete to the best of my knowledge and belief.					Date ApprovedAUG 1 1 1993						
The day In M	7.)			Date	-hhinasa	AI	Jb 1 1 1	993		
Signature					By						
Rhonda Nelson Production Clerk					MIKE WILLIAMS						
Printed Starge 2 1993 Title 748-3303					Title SUPERVISOR, DISTRICT II						
Date			-330. hone No								
-		•									

iga na nitra na matimi na nakalazio, a la transi ili a ta interpresi determinani internali internali internali 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.