Submit 5 Copies
Appropriate District Office
DISTRICT 1
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II P.O. Drawer DD, Anesia, NM 88210 State of New Mexico Energy, Minerals and Natural Resources Department

AUG 0 6 1993

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

Q I.D.

21STRICT III 0000 Rio Brazos Rd., Aztec, NM 874	10 REQUEST	FOR ALI	OWAB	LE AND A	AUTHORIZ	ATION				
•					TURAL GA	S				
Operator Marhoh Energy Cort	Marbob Energy Corporation					1	SI API No. -015- 25668			
Address	JOIACION V			· · · · · · · · · · · · · · · · · · ·	70.20		23000			
P. O. Drawer 217,		88210	·							
Reason(s) for Filing (Check proper bo		tr -	 .		er <i>(Please expla</i> i e from Le		Init			
New Well	Chang Oil	ge in Transport Dry Gas		~	Keely C					
Recompletion \square		Casinghead Gas Condensate Effective 8/1/93								
change of operator give name										
nd address of previous operator I. DESCRIPTION OF WEI	I AND LEASE								•	
Lease Nauie	Well No. Pool Name, Includi			ng Formution	Carbo CA	Kind of	Lease Lease No.			
Burch Keely Unit	10	8 Grb	д јаск	son SK Q	Grbg SA	AMKA	eoctat or 1/4/N			
Location Unit LetterP	, 330	Feet Fro	en The	S Line	and	660_ F∞	t From The	E	Line	
				Eddy						
Section 24 Tow	nship 17S	Range	29E	, NN	MPM,	·····			Lounty	
II. DESIGNATION OF TR	ANSPORTER OF	FOIL AND	NATU	RAL GAS		·				
Name of Authorized Transporter of C Navajo Refining Com	Name of Authorized Transporter of Oil or Condensate				Address (Give address to which approved copy of this form is to be sent) P. O. Box 159, Artesia, NM 88210					
Name of Authorized Transporter of C		or Dry C	Gas [copy of this form			
GPM Gas Corporation			·	4001 Pe	nbrook,	Odessa,	TX 79762			
If well produces oil or liquids, give location of tanks.	Unit S∞c.	Unit Sec. Twp. Rge.		ls gas actually	y connected?	When	When 7			
f this production is commingled with	that from any other lear	se or pool, give	conuningl	ing order numb	 эег.					
V. COMPLETION DATA										
Designate Type of Completion - (X) Oil Well Gas Well				New Well Workover Deepen			Plug Back Same Res'v Diff Res'v			
Date Spadded	Date Compl. Rea	idy to Prod.		Total Depth	L	L	P.B.T.D.			
Dan of soon			·	h	ĸ					
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation				Top Oil/Gas Pay			Tubing Depth			
Perforations								Depth Casing Shoe		
· · · · · · · · · · · · · · · · · · ·		<u>.</u>								
		TUBING, CASING AND CASING & TUBING SIZE			NG RECOR DEPTH SET	D	840	SACKS CEMENT		
HOLE SIZE	& TUBING S	IZE	DEF IN SET			Part ID-3				
· · · · · · · · · · · · · · · · · · ·								21-93	,	
							elis	Lens	eme	
		~;;;;;;;;								
V. TEST DATA AND REQ	UEST FOR ALLS fler recovery of total vo	OWABLE Jume of load o	oil and musi	be equal to or	· · exceed top allo	owable for this	depth or be for f	uli 24 hours.)		
OIL WELL (Test must be a Date First New Oil Run To Tank	Date of Test			Producing M	ethod (Flow, pu	unp, gas lift, e	ic.)			
				Casing Press	ure.		Choke Size			
Length of Test	Tubing Pressure	Tubing Pressure			110					
Actual Prod. During Test	Oil - Bbls.	Oil - Bbls.			Water - Bbls.			Gas- MCF		
				<u></u>		·	<u> </u>			
GAS WELL				TBbls, Conden	reste/MANCE		Gravity of Cond	ensale		
Actual Prod. Test - MCI/D Length of Test			Bois, Conden	PSICHAMAICI		Carry or announced				
l'esting Method (pirot, back pr.)	Tubing Pressure	Tubing Pressure (Shut-in)			Casing Pressure (Shut-in)			Choke Size		
						· · · · · · · · · · · · · · · · · · ·	<u> </u>			
VI. OPERATOR CERTI	FICATE OF CC	MPLIAN	ICE		DIL CON	ISERVA	TION DI	VISION	l	
I hereby certify that the rules and Division have been complied with	regulations of the Oil C	onservation n given above		.	· · · · · · · · · · · · · · · · · · ·					
is true and complete to the best of	my knowledge and bel	iel.		Date	Annrove	d 1	\UG 1 1 19	02		
	1. 10)			, , ippiove,	~ 	100 1 1 9	33		
Thomas /	Wison			By_	· · · · · · · · · · · · · · · · · · ·					
Signature Rhonda Nelson Production Clerk				ORIGINAL SIGNED BY MIKE WILLIAMS						
Printed Name 2 1993		Title		Title	- MIK	ERVISOR	1S . DISTRICT I			
		748-330 Telephone N			501		, =	•		
i)ate		Terebrione 14	~1	11						

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.

