

OIL CONSERVATION DIVISION

Drawer DD Artesia, N.M.

DISTRICT OFFICE II

September thru December 1987
NO. 2061 N

SUPPLEMENT TO THE OIL PRORATION SCHEDULE

DATE October 30, 1987

PURPOSE ALLOWABLE ASSIGNMENT - NEW OIL

The following Marbob Energy Corp. well in the Grayburg Jackson
Seven Rivers Queen Grayburg San Andres Pool was completed 10-26-87.
This well is located in the same unit with well #35. The unit is
currently assigned top allowable for the pool, of 80 barrels of oil
per day.

M. Dodd B #59-P-14-17-29

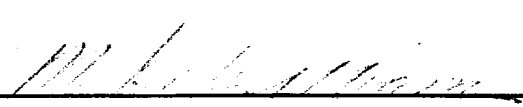
Total Unit Allowable for the month of October - 2480 bbls.
Total Unit Allowable for the month of November - 2400 bbls.
Total Unit Allowable for the month of December - 2480 bbls.

MP/nn

Marbob Energy Corp.

NRC
EP

OIL CONSERVATION DIVISION


DISTRICT SUPERVISOR

RECEIVED

OCT 29 '87

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES RETURNED	
DISTRIBUTION	
SANTA FE	<input checked="" type="checkbox"/>
FILE	<input checked="" type="checkbox"/>
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	<input checked="" type="checkbox"/>
OIL	<input checked="" type="checkbox"/>
GAS	<input checked="" type="checkbox"/>
OPERATOR	<input checked="" type="checkbox"/>
PRODUCTION OFFICE	

Operator
Marbob Energy Corporation

O. C. D.
ARTESIA, OFFICE

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

Reason(s) for filing (Check proper box)

New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

Other (Please explain)

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name M. Dodd "B"	Well No. 59	Pool Name, including Formation Grbg Jackson SR Q Grbg SA	Kind of Lease State, Federal or Fee Federal	LC Lease No. 028731(B)
Location Unit Letter <u>P</u> : <u>834</u> Feet From The <u>South</u> Line and <u>819</u> Feet From The <u>East</u> Line of Section <u>14</u> Township <u>17S</u> Range <u>29E</u> , NMPM, <u>Eddy</u> County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Navajo Refining Company	Address (Give address to which approved copy of this form is to be sent) P. O. Drawer 159, Artesia, NM 88210	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips 66 Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) 4001 Penbrook, Odessa, TX 79762	
If well produces oil or liquids, give location of tanks.	Unit A	Sec. 15
	Twp. 17S	Rge. 29E
	Is gas actually connected? Yes	
	When 10/27/87	

If 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 <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Hes'tv. <input type="checkbox"/>	Diff. Res'tv. <input type="checkbox"/>
Date Spudded 9/24/87	Date Compl. Ready to Prod. 10/26/87		Total Depth 4585'		P.B.T.D. 4536'			
Elevations (DF, RKB, RT, CR, etc.) 3606.8' GR	Name of Producing Formation San Andres		Top Oil/Gas Pay 2810'		Tubing Depth 3450'			
Perforations 2810-3353' attached					Depth Casing Shoe 4565'			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4"	8 5/8"	335'	250 sx, circ 75 sx
7 7/8"	5 1/2"	4565'	2030 sx, circ 300 sx
	2 7/8"	3450'	

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)

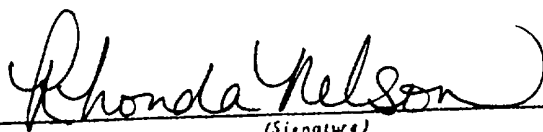
Date First New Oil Run To Tanks 10/26/87	Date of Test 10/27/87	Producing Method (Flow, pump, gas lift, etc.) Pumping - 2 1/2"	
Length of Test 24 hrs.	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test 68	Oil-Bbls. 68	Water-Bbls. frac	Gas-MCF 110

GAS WELL

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


(Signature)

Production Clerk

(Title)

10/28/87

(Date)

OIL CONSERVATION DIVISION

OCT 30 1987

APPROVED

Original Signed By

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 recompleted wells.