

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

State of New Mexico
Energy, Minerals and Natural Resources Department

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

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87411

RECEIVED OIL CONSERVATION DIVISION

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

Santa Fe	
File	
Transporter	Oil
Operator	Gas

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

I. **O. C. D. ARTESIA OFFICE**

Operator Marbob Energy Corporation	Well API No.
Address P. O. Drawer 217, Artesia, NM 88210	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain) New Well <input checked="" type="checkbox"/> Change in Transporter of: Request allowable of 80 bbls./day Recompletion <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Change in Operator <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
If change of operator give name and address of previous operator	

II. DESCRIPTION OF WELL AND LEASE

Lease Name Foster Eddy	Well No. 6	Pool Name, Including Formation Grbg Jackson SR Q Grbg SA	Kind of Lease State, Federal or X	Lease No. LC-049998(A)
Location Unit Letter C : 990 Feet From The North Line and 2310 Feet From The West Line Section 17 Township 17S Range 31E , NMPM, Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> 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 88241					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Conoco, Inc.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 460, Hobbs, NM 88240					
If well produces oil or liquids, give location of tanks.	Unit J	Sec. 17	Twp. 17S	Rge. 31E	Is gas actually connected? Yes	When? 7-7-89

If this production is commingled with that from any other lease or pool, give commingling order number.

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well XX	Gas Well	New Well X	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 5/5/89	Date Compl. Ready to Prod. 7/6/89		Total Depth 5540'		P.B.T.D. 5514'			
Elevations (DF, RKB, RT, GR, etc.) 3714.3' GR	Name of Producing Formation Grbg SA		Top Oil/Gas Pay 3090 2745		Tubing Depth 3350'			
Perforations SEE ATTACHED 2945-4813'					Depth Casing Shoe 5517'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4"	8 5/8"		474'		400 SX Post ID-2			
7 7/8"	5 1/2"		5517'		4525 SX 7-14-89			
	2 7/8"		3350'		comp & BK			

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 7/7/89	Date of Test 7/8/89	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hrs.	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test 88	Oil - Bbls. 88	Water - Bbls. 67	Gas - MCF 110

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke 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.

Rhonda Nelson
Signature
Rhonda Nelson Production Clerk
Printed Name
7/10/89 Title
748-3303
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved **JUL 14 1989**
By **ORIGINAL SIGNED BY**
MIKE WILLIAMS
Title **SUPERVISOR, DISTRICT II**

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.