

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-1-78

RECEIVED

FEB 4 1982

O. C. D.
ARTESIA, OFFICE

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REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Marbob Energy Corporation

P. O. Drawer 217, Artesia, NM 88210

Location(s) for filing (Check proper box)	Other (Please explain)
Well <input type="checkbox"/>	
Completion <input type="checkbox"/>	
Change in Ownership <input checked="" type="checkbox"/>	Effective 1/1/82
Change in Transporter of:	
Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>
Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>

Change of ownership give name and address of previous owner: Harlan Oil Company, P. O. Box 688, Artesia, NM 88210

DESCRIPTION OF WELL AND LEASE

Well Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Federal G	2	Dayton (G) East	State, Federal or Fee Federal	NM025606

Well Letter	B	990 Feet From The	N	Line and	1650	Feet From The	E	
Line of Section	29	To Township	18 S	Range	27E	NMPM,	Eddy	County

IGNITION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Navajo Crude Oil Purchasing Company	P. O. Box 175, Artesia, NM 88210
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)

Well produces oil or liquids, location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	G	29	18	27	NO	

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

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Reservoir	Drill, Res.
Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
Locations (D.F., RKB, RT, CR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
Locations			Depth Casing Shoe					

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

TEST DATA AND REQUEST FOR ALLOWABLE (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)

First Flow Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Time of Test	Tubing Pressure	Casing Pressure	Choke Size
Oil Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

Posted D-3
Chg. Operator
2-19-82

WELL

Oil Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (prior, 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 is true and complete to the best of my knowledge and belief.

OIL CONSERVATION DIVISION

FEB 15 1982

APPROVED

BY

SUPERVISOR, DISTRICT II

TITLE

This form is to be used in compliance with RULE 10.1.

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 10.1.

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 conditions. Separate Form C-104 must be filed for each pool in multiple.

Production Clerk

February 1, 1982