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LAND OFFICE		
TRANSPORTER	OIL	/
	GAS	
OPERATOR		/
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

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MAY 3 1977

I. OPERATOR

Operator  
Marathon Oil Company

Address  
P. O. Box 2409, Hobbs, New Mexico 88240

Reason(s) for filing (Check proper box)

New Well	<input checked="" type="checkbox"/>	Change in Transporter of:		Other (Please explain)
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>	CASINGHEAD GAS MUST NOT BE
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>	FLARED AFTER 2-1-77
		Condensate	<input type="checkbox"/>	UNLESS AN EXCEPTION TO Rule 306

If change of ownership give name and address of previous owner

IS OBTAINED

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Arnquist Estate	4	Undesignated Yeso	State, Federal or Fee Fee	-
Location				
Unit Letter	H	1650	Feet From The North	430
Line of Section		29	Township	18S
Range		26E	NMPM,	Eddy
				County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil	<input checked="" type="checkbox"/> or Condensate	Address (Give address to which approved copy of this form is to be sent)				
Permian Corporation		P.O. Box 3119, Midland, Texas 79701				
Name of Authorized Transporter of Casinghead Gas	<input type="checkbox"/> or Dry Gas	Address (Give address to which approved copy of this form is to be sent)				
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	H	29	18S	26E	No	

If this production is commingled with that from any other lease or pool, give commingling order number: No

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
X	X		X					
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
2-26-77	4-8-77	2825'	2777'					
Elevations (DF, RKB, RT, CR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
GR 3427'	Yeso	2355'	2425'					
Perforations		Depth Casing Shoe						
2355-2635' 31 holes		2825'						
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
17 1/2"	13 3/8"	299'	360 Class C					
12 1/4"	9 5/8"	1168'	400 HOWCO Lite, 300 Class C					
8 3/4"	7"	2825'	700, 505/50 CL C Poz A					
	2 3/8"	2425'						

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 Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
4-8-77	4-25-77	Pumping	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24	-	65	-
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
182	17	165	60

GAS WELL

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

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Anthony Kovacsich  
(Signature)  
Petroleum Engineer  
(Title)  
April 29, 1977  
(Date)

OIL CONSERVATION COMMISSION  
MAY 5 1977  
APPROVED  
BY N. A. Gussett  
TITLE SUPERVISOR, DISTRICT II

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.

# L O DRILLING COMPANY

P. O. Box 709  
ARTESIA, NEW MEXICO 88210

PHONE: 505-748-2938

ARNQUEIST ESTATE # 4  
DEVIATION SURVEY

300'	$\frac{1}{2}$
611'	1
994'	1
1170'	1
1665'	$1\frac{1}{4}$
2114	$1\frac{1}{4}$
2825	1

TOOL PUSHER: JOE M. COX

Joe M. Cox

L. O. DRILLING COMPANY

L. L. LIVEOAK

L. L. Liveoak

STATE OF NEW MEXICO  
COUNTY: EDDY

SUBSCRIBED AND SWORN BEFORE ME THIS 14<sup>th</sup> DAY OF March, 1977.

Notary Public  
NOTARY PUBLIC

2-11-81  
MY COMMISSION EXPIRES