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

Form C-104
Supersedes Old C-101 and
C-102 1-1-65
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APR 06 1981

O. C. D.
ARTESIA OFFICE

Operator **Marbob Energy Corporation**

Address **P.O. Box 304, Artesia, N.M. 88210**

Reason(s) for filing (Check proper box)				Other (Please explain)			
New Well	☒	Change in Transporter of		CASINGHEAD GAS MUST NOT BE FLARED AFTER 6-1-81 UNLESS AN EXCEPTION TO Rule 306 IS OBTAINED			
Recompletion	☐	Oil	☐			Dry Gas	☐
Change in Ownership	☐	Casinghead Gas	☐			Condensate	☐

If change of ownership give name
and address of previous owner

Lease Name Tr. 5 West Artesia Grbg. Ut.		Well No. 22	Pool Name, Including Formation Artesia Qn. Grbg. SA	Kind of Lease State, Federal or Fee State	Lease No. E-7179
Location					
Unit Letter L	2269	Feet From The South	Line and 330	Feet From The West	
Line of Section 8	Township 18S	Range 28E	NMPM, Eddy		County

Name of Authorized Transporter of Oil ☒ or Condensate ☐					Address (Give address to which approved copy of this form is to be sent)	
Navajo Refining Co., Pipeline Div.					P.O. Box 159, Artesia, N.M. 88210	
Name of Authorized Transporter of Casinghead Gas ☐ 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 L	Sec. 8	Twp. 18S	Rge. 28E	Is gas actually connected? No	When

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

Designate Type of Completion - (X)		Oil Well ☒	Gas Well ☐	New Well ☒	Workover ☐	Deepen ☐	Plug Back ☐	Stim Res't ☐	Other ☐
Date Spudded 2/12/81	Date Compl. Ready to Prod. 3/23/81		Total Depth 2551'		P.B.T.D. 2531				
Elevations (DF, RKB, RT, GR, etc.) 3621.1' GR	Name of Producing Formation Grayburg		Top Oil/Gas Pay 2004'		Tubing Depth 2198'				
Perforations 2004-06', 2046-48', 2057-59', 2086-90', 2116-20', 2174-82', 2200-04'		2210-18'		Depth Casing Shoes 2496' 2531					
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
12 1/4"	8 5/8" 24#		521'		300				
7 7/8"	4 1/2" 10.50#		2496' 2531		625				
	2 3/8"		2198						

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 3/26/81	Date of Test 3/27/81	Producing Method (Flow, pump, gas lift, etc.) Pumping			
Length of Test 24 hrs.	Tubing Pressure 20#	Casing Pressure 20#		Choke Size 1 1/2"	
Actual Prod. During Test 29	Oil - Bbls. 27	Water - Bbls. 2		Gas - MCF -0-	

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

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.

Carolyn Orlis
(Signature)
Production Clerk
(Title)
3/31/81
(Date)

OIL CONSERVATION COMMISSION
APR 08 1981

APPROVED _____, 19____

BY **W.A. Gressett**

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 deep well, this form must be accompanied by a tabulation of the device tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for all old or new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of well name or number, or transporter or other such change of conditions.