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U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRODUCTION OFFICE		

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-111
Effective 1-1-65

RECEIVED

JAN 30 1978

Operator		Marbob Energy Corporation		O. C. C. ARTESIA OFFICE	
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:			
Recompletion	☐	Oil	☐	Dry Gas	☐
Change In Ownership	☒	Casinghead Gas	☐	Condensate	☐

If change of ownership give name and address of previous owner **D. R. Clary, P O Box 1267, Odessa, Texas 79760**

II. DESCRIPTION OF WELL AND LEASE					
Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.	
Turkey Track Sec. 3 Unit	15	Turkey Track Seven Rivers	State, XXXXXXXXXX	B-9739	
Location					
Unit Letter	P	Feet From The	330	Line and	990 Feet From The East
Line of Section	3	Township	19 S	Range	29 E , NMPM, Eddy County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS					
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 division			N. Freeman Ave., Artesia, N. M.		
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐			Address (Give address to which approved copy of this form is to be sent)		
none					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected? When
	F	3	19	29	no

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Restv.	Diff. Restv.
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.D.T.D.				
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth				
Perforations						Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

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.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Lbbs. Condensate/MCF	Gravity of Condensate
Testing Method (flow, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
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.		APPROVED JAN 30 1978 , 19	
Secretary (Signature) 1/27/78 (Date)		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 allowables for a newly drilled or deepened well, this form must be accompanied by a tabulation of the available data taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allowables on new and recompleted wells. Fill out only Sections I, II, III, and VI for changes of ownership, well name or number, or transporter, or other such change of conditions.	