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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS
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Form C-104
Supersedes Old C-104 and
Effective 1-1-65

JAN - 8 1980

Operator **Marbob Energy Corp.** **O. C. D.**
Address **ARTESIA OFFICE**

Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well ☒	Change in Transporter of ☐	Request 20 bbl/day allowable	
Recompletion ☐	Oil ☐ Dry Gas ☐		
Change in Ownership ☐	Casinghead Gas ☐ Condensate ☐		

If change of ownership give name and address of previous owner _____

DESCRIPTION OF WELL AND LEASE		R-7222 - 2/25/83	
Lease Name	Well No.	Pool Name, including Formation	Kind of Lease
Turkey Track Sec. 3 Unit	19	Turkey Track SR Queen Grbg. SA	State, Federal or Fee State
Location		B-8876	
Unit Letter	H	1650 Feet From The North Line and 950 Feet From The East	
Line of Section	3	Township 19S	Range 29E, NMFM, Eddy

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 Div.		N. Freeman Ave., 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)	
Phillips Petroleum Co.		4001 Penbrook Ave., Odessa, Texas 79762	
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp. Rge.
	F	3	19S 29E
Is gas actually connected?		When	
Yes		1/6/80	

If this 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
X			
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
12/10/79	12/29/79	2905'	
Elevations (DF, RAB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
3404 GR	Grayburg	2798'	2800'
Perforations	2798-2810		Depth Casing Shoes
TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
11"	8 5/8" 20#	278'	125 sax
7 7/8"	4 1/2" 10.5#	2893'	400 sax

TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed total oil for this depth or be for full 24 hours)			
Date First New Oil Ran To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
1/6/80	1/7/80	Pump	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs.	20#	20#	
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
200	20	180	to pipeline

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

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 - 9 1980 , 19	
Carolyn Davis (Signature)		BY W. A. Lussert	
Secretary		TITLE SUPERVISOR, DISTRICT II	
1/8/80		This form is to be filed in compliance with RULE 1104.	
(Date)		If this is a request for allowable for a newly drilled or deep well, this form must be accompanied by a tabulation of the deviat tests taken on the well in accordance with RULE 111.	
		All sections of this form must be filled out completely for all wells on new and recompletions wells.	
		Fill out only Sections I, II, III, and VI for changes of own well name or number, or transporter, or other such change of credit	