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Form C-104
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Page 1STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501
O. C. D.
ARTESIA, OFFICEREQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
Marathon Oil Company ✓

Address
P.O. Box 552, Midland, Texas 79702

Reason(s) for filing (Check proper box)

☒ New Well	Change in Transporter of:	Other (Please explain)
☐ Recompletion	☐ Oil	GAS MUST NOT BE 9/24/88 NOT FROM FROM RELEASED
☐ Change in Ownership	☐ Casinthead Gas ☐ Dry Gas ☐ Condensate	

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name Johnson "B" Federal A/C 1	Well No. 7	Pool Name, including Formation Tamano (Bone Spring)	Kind of Lease State, Federal or Fee Federal	Lease No. LC-029388-D
Location Unit Letter <u>F</u> : <u>2310</u> Feet From The <u>North</u> Line and <u>2160</u> Feet From The <u>West</u> Line of Section <u>11</u> Township <u>18-S</u> Range <u>31-E</u> , NMPM, <u>Eddy</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Koch Oil Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 3609, Midland, Texas 79702
Name of Authorized Transporter of Casinthead Gas ☒ or Dry Gas ☐ Conoco Inc.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 90, Maljamar, New Mexico 88264
If well produces oil or liquids, give location of tanks. Unit <u>C</u> Sec. <u>11</u> Twp. <u>18-S</u> Rge. <u>31-E</u>	Is gas actually connected? <u>No</u> when _____

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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.

-J. R. Jenkins

(Signature)

Hobbs Production Superintendent

(Title)

7/19/88

(Date)

OIL CONSERVATION DIVISION

APPROVED JUL 27 1988, 19 _____
BY _____ Original Signed By _____
TITLE Mike Williams

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.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

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					
Date Spudded 6-16-88	Date Compl. Ready to Prod. 7-18-88	Total Depth 9,000'				P.B.T.D. 9,000'			
Elevations (DF, RKB, RT, CR, etc.) 3736.6 GL	Name of Producing Formation Bone Spring	Top Oil/Gas Pay 8,070'				Tubing Depth 7,974'			
Perforations 8,070'-8,160' w/2 JSPF						Depth Casing Shoe 9,000'			
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
17-1/2"	13-3/8"		796'		526 sx Class "C"				
11"	8-5/8"		2,702'		950 sx Class "C"				
7-7/8"	5-1/2"		9,000'		1490 sx Class "H"				
N/A	2-7/8" Tubing		7,974'		N/A				

V. 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)

Date First New Oil Run To Tanks 7-16-88	Date of Test 7-18-88	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24	Tubing Pressure 240 psig	Casing Pressure 0 psig	Choke Size 24/64"
Actual Prod. During Test	Oil - Bbls. 484.36	Water - Bbls. 0	Gas - MCF 309.82

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (plot, back pr.)	Tubing Pressure (Start-End)	Casing Pressure (Start-End)	Choke Size