Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

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State of New Mexico Linergy, Minerals and Natural Resources Depart. Int

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Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

JAN 16 '91

1000 Rio Brazos Rd., Aztec, NM 87410							ZATION	O, Ç. 1 Artesia, oi			
I.		TO TR	ANSPO	ORT OIL	_ AND NA	TURAL GA	10	API No.	TACE		
Operator Marathon Oil Company	/							30-015-2	26438		
Address											
P. O. Box 552, Midlan	d, Tex	as 79	702								
Reason(s) for Filing (Check proper box)					Oth	er (Please expla	iin)				
New Well		Change	in Transpo			CASINGH	EAD GA	S MUST	NOT BE		
Recompletion	Oil		Dry Ga								
Change in Operator	Casinghe	id Gas	Conden	sate		FLARED A					
If change of operator give name and address of previous operator						UNLESS A			ROM		
II. DESCRIPTION OF WELL	AND LE	ASE			Į	HE D. L. A	VI. 15 UE	STAINED			
Lease Name		Well No			ing Formation			of Lease		ease No.	
Stetco "10" Federal		2	Tan	nano (i	Bone Spr	ing)	State,	Federal or Fe	T.C-0	29388-A	
Location									Foot		
Unit LetterH	_ :23	310	Feet Fre	om The _	Worth Lin	e and 660) Fe	et From The	<u>East</u>	Line	
Section 10 Township	. 18	3-S	Range	31-1	E N	MPM,	Eddy			County	
Section 10wmin	·		Kange		,14	VAL 1113					
III. DESIGNATION OF TRAN	SPORTE	ROF	DIL AN	D NATU	RAL GAS						
Name of Authorized Transporter of Oil	X	or Cond	ensate		1	e address to wh				pri)	
Pride Pipeline Company	•				_ <u> </u>	Box 243				est)	
Name of Authorized Transporter of Casing	mead Gas	$\square X$	or Dry	U25			~ •			orm/	
Conoco Inc. If well produces oil or liquids,	Unit	Sec.	Twp.	Rge.		Box 90, v connected?	Maljam When		00204		
give location of tanks.	l H	10	1 18	1 31	No	,	i				
If this production is commingled with that i		her lease o		e comming		ber:					
IV. COMPLETION DATA			_								
Designate True of Completion	(%)	Oil We	an i c	ias Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion		X al Pardu	lo Brad		Total Depth			P.B.T.D.	<u> </u>		
Date Spudded	Date Com	рг. кежту 9-29-			Total Dopus	8700 '		1 -	8617'		
8-26-90 Elevations (DF, RKB, RT, GR, etc.)	Name of I				Top Oil/Gas	Top Oil/Gas Pay			Tubing Depth		
3733' GL						8020'			8276'		
Perforations								Depth Casing Shoe			
Second Bone Spring Car	bonate	8020	-8042	2': 805	50'-8100'		_	<u> </u>	8700'		
	TUBING, CASING AND				CEMENTING RECORD			SACKS CEMENT			
HOLE SIZE	CA	CASING & TUBING SIZE		DEPTH SET		447 sx "C": circ					
<u>17 1/2"</u> 11"	 	<u>13_3</u> 8_5				<u>756'</u> 2335'		674 sx "C"; circ			
7 7/8"	 				 	8700 '				est TOC @ 5	
1 1/0		5 1						1 1370 8			
	 	5 <u>1</u>						13/U S			
V. TEST DATA AND REQUES	T FOR	2 3 ALLOV	/8" VABLE			8276'					
OIL WELL (Test must be after r	T FOR	2 3 ALLOV	/8" VABLE	oil and mus	t be equal to or	8276 *	wable for thi	s depth or be	for full 24 ho	ers.)	
OIL WELL (Test must be after r Date First New Oil Run To Tank	T FOR A	2 3 ALLOV otal volum	/8" VABLE ue of load o	oil and mus	t be equal to or Producing M	8276 * exceed top allo	mp, gas lift, e	s depth or be	for full 24 ho		
OIL WELL (Test must be after n Date First New Oil Run To Tank 10-2-90	Date of Te	2 3 ALLOW otal volum est 1-1	/8" VABLE	oil and mus	Producing M	8276 ' exceed top allo ethod (Flow, pu	mp, gas lift, e	s depth or be	for full 24 ho	ers.)	
OIL WELL (Test must be after n Date First New Oil Run To Tank 10-2-90 Length of Test	ecovery of L	2 3 ALLOW otal volum est 1-1	/8" VABLE ue of load o	vil and mus	Producing MacCasing Press	8276 ' exceed top allo ethod (Flow, pu Pumpi ure	mp, gas lift, e	s depth or be	for full 24 how	ers.)	
OIL WELL (Test must be after n Date First New Oil Run To Tank 10-2-90 Length of Test 24 hrs	Date of Te	2 3 ALLOW otal volument 1-1 essure	/8" VABLE ue of load o	ril and mus	Producing MacCasing Press	8276 * exceed top allo ethod (Flow, pu Pumpi ure 50 psig	mp, gas lift, e	s depth or be	for full 24 how	ers.)	
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OIL WELL (Test must be after n Date First New Oil Run To Tank 10-2-90 Length of Test 24 hrs Actual Prod. During Test GAS WELL	Date of Te Tubing Pr Oil - Bbls	2 3 ALLOW otal volume est 1-1 essure	/8" VABLE se of load of	vil and muss	Producing Months of the Casing Press Water - Bbls. Bbls. Condet	8276 * exceed top allo ethod (Flow, pu Pumpi ure 50 psig 7	mp, gas lift, e	choke Size Gas- MCF	for full 24 how Parace 2 constants 16	ers.)	
OIL WELL (Test must be after n Date First New Oil Run To Tank 10-2-90 Length of Test 24 hrs Actual Prod. During Test GAS WELL Actual Prod. Test - MCF/D	Date of Te Tubing Pr Oil - Bbls	2 3 ALLOW otal volumest 1-1 essure . 1	/8" VABLE to of load of 0-90	nil and mus	Producing Months of the Casing Press	8276 * exceed top allo ethod (Flow, pu Pumpi ure 50 psig 7	mp, gas lift, e	s depth or be etc.) Choke Size Gas- MCF	for full 24 how Parace 2 constants 16	ers.)	
OIL WELL (Test must be after n Date First New Oil Run To Tank 10-2-90 Length of Test 24 hrs Actual Prod. During Test GAS WELL	Date of Te Tubing Pr Oil - Bbls	2 3 ALLOW otal volumest 1-1 essure . 1	/8" VABLE to of load of 0-90	vil and mus	Producing Months of the Casing Press Water - Bbls. Bbls. Condet	8276 * exceed top allo ethod (Flow, pu Pumpi ure 50 psig 7	mp, gas lift, e	choke Size Gas- MCF	for full 24 how Parace 2 constants 16	ers.)	
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INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.