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

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

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico  
Energy, Minerals and Natural Resources Department

RECEIVED

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

OIL CONSERVATION DIVISION MAY 18 1992  
P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

O. C. D.  
OFFICE

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

Operator Marathon Oil Company	Well API No. 30-015-26864
Address PO Box 552, Midland, TX 79702	
Reason(s) for Filing (Check proper box) <input checked="" type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Operator <input type="checkbox"/> Other (Please explain)	
Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
If change of operator give name and address of previous operator	

II. DESCRIPTION OF WELL AND LEASE

Lease Name Johnson "B" A/C 1	Well No. 12	Pool Name, Including Formation Shugart (Y, SR, Q G)	Kind of Lease State, Federal or Fee	Lease No. LC-029388-D
Location Unit Letter F : 2310 Feet From The North Line and 1988 Feet From The West Line Section 11 Township 18-S Range 31-E, NMPM, Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Pride Pipeline Company	Address (Give address to which approved copy of this form is to be sent) PO Box 2434, Abilene, TX 79604					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Conoco, Inc.	Address (Give address to which approved copy of this form is to be sent) PO Box 90, Maljamar, NM 88264					
If well produces oil or liquids, give location of tanks.	Unit E	Sec. 11	Twp. 18	Rge. 31	Is gas actually connected? Yes	When? 5-1-92
If this production is commingled with that from any other lease or pool, give commingling order number:					CTB - 363	

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded April 2, 1992	Date Compl. Ready to Prod. 5-1-92		Total Depth 4450'		P.B.T.D. 4350'			
Elevations (DF, RKB, RT, GR, etc.) 3740' GR, 3750' KB	Name of Producing Formation Grayburg		Top Oil/Gas Pay 4003		Tubing Depth 4016			
Perforations Grayburg: 4003', 4006', 4012'-4033' 2 JSPF					Depth Casing Shoe 4450'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4"	8 5/8"		750'		410 sxs Post 10-2			
7 7/8"	5 1/2"		4450'		1448 sxs 6-5-92			
N/A	2 7/8"		4016		comp + BR			

V. TEST DATA AND REQUEST FOR ALLOWABLE

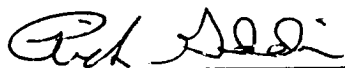
OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)			
Date First New Oil Run To Tank May 1, 1992	Date of Test May 15, 1992	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hrs.	Tubing Pressure	Casing Pressure	Choke Size N/A
Actual Prod. During Test 351	Oil - Bbls. 63	Water - Bbls. 288	Gas - MCF 40

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

VI. OPERATOR 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 above is true and complete to the best of my knowledge and belief.



Signature  
Rick Gaddis Production Engineer  
Printed Name  
May 15, 1992 (915) 682-1626  
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved MAY 25 1992

By ORIGINAL SIGNED BY  
MIKE WILLIAMS  
Title SUPERVISOR, DISTRICT II

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.