

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, NM 87504-2088

RECEIVED

MAR 03 1997 ☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

Operator name and Address Marathon Oil Company P.O. Box 1324 Artesia, NM 88210		2 OGRID Number D014022
3 Reason for Filing Code Sell approx. 400 bbls Skim Oil		
4 API Number 30-015-27465	5 Pool Name SMD Devonian	6 Pool Code 96101
7 Property Code 6408	8 Property Name Indian Hills State Com.	9 Well Number 7

II. Surface Location

UL or lot no.	Section	Township	Range	Lot. Idn	Feet from the	North/South Line	Feet from the	East/West line	County
F	36	20S	24E		1650 FNL		1980 FWL		Eddy

Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot. Idn	Feet from the	North/South Line	Feet from the	East/West line	County

12 Lse Code State	13 Producing Method Code Skim Disp. Tank	14 Gas Connection Date	15 C-129 Permit Number	16 C-129 Effective Date	17 C-129 Expiration Date
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III. Oil and Gas Transporters

18 Transporter OGRID	19 Transporter Name and Address	20 POD	21 O/G	22 POD ULSTR Location and Description
D0734	Amoco Pipeline ICT 502 N. West Avenue Levelland, TX 79336	2815022	Oil	F, 36, 20S, 24E

IV. Produced Water

23 POD	24 POD ULSTR Location and Description

V. Well Completion Data

25 Spud Date	26 Ready Date	27 TD	28 PSTD	29 Perforations

30 Hole Size	31 Casing & Tubing Size	32 Depth Set	33 Sacks Cement

VI. Well Test Data

34 Date New Oil	35 Gas Delivery Date	36 Test Date	37 Test Length	38 Tbg. Pressure	39 Csg. Pressure
40 Choke Size	41 Oil	42 Water	43 Gas	44 AOF	45 Test Method

46 I hereby certify that the rules 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:

Printed name:

Deanna M. McCoy

Title:

Records Processor

Date: 02/28/97

(505) 457-2621 x101

OIL CONSERVATION DIVISION

Approved by:

ORIGINAL SIGNED BY TIM W. GUM
DISTRICT II SUPERVISOR

Title:

Approval Date:

MAR 10 1997

47 If this is a change of operator fill in the OGRID number and name of the previous operator

Previous Operator Signature

Printed Name

Title

Date