

OIL CONSERVATION DIVISION

P. O. BOX 2080

SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-1-78

RECEIVED

FEB 4 1982

C. C. D.

ARTESIA, OFFICE

REQUEST FOR ALLOWABLE
AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF APPROVED DEWELLS	
DISTRIBUTION	
SANTA FE	7
FILE	
VEGAS	
LAND OFFICE	
TRANSPORTER	OIL
OPERATOR	
PRODUCTION OFFICE	

Marbob Energy Corporation

Address

P. O. Drawer 217, Artesia, NM 88210

Reason(s) for filing (Check proper box)

New Well ☐Recompletion ☐Change in Ownership ☒

Change in Transporter of:

Oil ☐Casinghead Gas ☐Dry Gas ☐Condensate ☐

Other (Please explain)

Effective 1/1/82

If change of ownership give name and address of previous owner Harlan Oil Company, P. O. Box 688, Artesia, NM 88210

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Foot Name, including Formation	Kind of Lease	Lease No.
State	4	Millman Grayburg	State, Federal or Fee State	B-9189
Location				
Unit Letter	N	660	Feet From The	S
Line and	1980	Feet From The	W	
Line of Section	18	Township	19S	Range
			28E	NMPL
			Eddy	County

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 Crude Oil Purchasing Company	P. O. Box 175, Artesia, NM 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)					
If well produces oil or liquids, give location of tank.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	N	18	19S	28E	NO	

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	New Well	Workover	Deepen	Plug Back	Stimulated	Other
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
Elevation (FEET, REL. RT, CR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
Production			Depth Casing, etc.					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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 oil able for this depth or be for full 24 hours)

Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	Choke Size
Length of Test	Tubing Pressure	Casing Pressure	
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

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

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.

Production Clerk

Februray 1, 1982

OIL CONSERVATION DIVISION

APPROVED FEB 15 1982
BY *W. A. G. [Signature]*
TITLE SUPERVISOR, DISTRICT II

This form is to be filed in compliance with NOLA 1000.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviate tests taken on the well in accordance with NOLA 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 transportation or other such change of condition. Separate Forms C-104 must be filed for each pool in multi-