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TRANSPORTER	OIL
	GAS
OPERATOR	1
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

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DEC 1 1970

O. C. C.

ARTESIA, OFFICE

I. Operator ODESSA NATURAL CORPORATION

Address P. O. Box 3908, Odessa, Texas 79760

Reason(s) for filing (Check proper box)

New Well	<input type="checkbox"/>	Change in Transporter of:	
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>
Change in Ownership	<input checked="" type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

Other (Please explain)

If change of ownership give name and address of previous owner Odessa Natural Gasoline Co., P. O. Box 3908, Odessa, Texas 79760

II. DESCRIPTION OF WELL AND LEASE

Lease Name J. C. Williamson Standard Fed. Gas "Comm"	Well No. 1	Pool Name, including Formation Indian Basin - Upper Penn.	Kind of Lease <del>State</del> Federal <del>XXX</del>	Lease No.
Location Gas Pool - Cisco Canyon				
Unit Letter: G; 1980 Feet From The North Line and 1980 Feet From The East				
Line of Section 19 Township 21 S Range 23 E, NMPM, Le Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Split Connection

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Marathon Oil Company	Box 1394, Artesia, New Mexico
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Delhi Gas Pipeline Corp. Marathon Oil Co.	2520 Fidelity Union Tower, Dallas, Texas 75250 Box 1394, Artesia, New Mexico
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
G 19 21S 23E	Yes September 16, 1965 January 1, 1966

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'ty.	Diff. Res'ty.
		X					X	
Date Spudded 8-17-61	Date Compl. Ready to Prod. 12-18-61	Total Depth 9310	P.B.T.D. 7515					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation Cisco-Canyon	Top Oil/Gas Pay 7060	Tubing Depth 7212					
Perforations 7060-7110	7224-7270	Depth Casing Shoe 9310						
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
17 1/2	13 3/8	30	50					
12 3/4	9 5/8	1720	300					
8 3/8	7	6809	75					
6 3/4	4 1/2 Liner	6645-7515	110					

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

GAS WELL

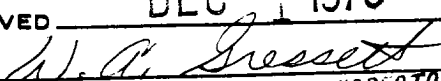
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

  
(Signature)  
Horace L. Conger - Production Foreman  
(Title)  
November 23, 1970  
(Date)

OIL CONSERVATION COMMISSION

APPROVED DEC 1 1970, 19  
BY   
OIL AND GAS INSPECTOR  
TITLE

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.