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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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MAR 12 1965

Operator		O. C. C. ARTEBIA, OFFICE		
Marathon Oil Company				
Address Box 220 Hobbs, New Mexico				
Reason(s) for filing (Check proper box)		Other (Please explain)		
New Well	<input checked="" type="checkbox"/>	Change in Transporter etc.	Lowe Drilling Company will use gas to operate engines on drilling rig	
Incompletion	<input type="checkbox"/>	Oil		<input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas		<input type="checkbox"/>

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease
North Indian Basin Unit	1	Indian Basin - Morrow Gas	State, Federal or Fee
Location			Federal
Unit Letter	M	660 Feet From The	S Line and 660 Feet From The
			W
Line of Section	10	Township	21 S Range 23 E, NMFM, Eddy County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil	<input type="checkbox"/>	or Condensate	<input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
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)	
Lowe Drilling Company				Box 832 Midland, Texas	
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected? When
					yes 3-11-65

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'tv.	Diff. Res'tv.
		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					
Date Spudded	Date Comp. Ready to Prod.	Total Depth	P.B.T.D.					
3-28-63	7-12-63	10,100'	9,600'					
Pool	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
Indian Basin	Morrow Gas	9118'	8957'					
Perforations	9118 - 9130' and 9160 - 9172'					Depth Casing Shoe		
9600'								
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
15"	10-3/4" csg		1628'		1550			
8-3/4"	5-1/2" csg		9600'		2130			
	2-3/8" tbg		8957'					

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
6854	24 hrs		
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size
absolute open flow	2206#	Packer	16/64"

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.

Ass't Area Superintendent  
March 11, 1965

OIL CONSERVATION COMMISSION

MAR 16 1965

APPROVED  
BY  
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 Sections I, II, III, and VI only 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.