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NEW MEXICO OIL CONSERVATION COMM. ON  
REQUEST FOR ALLOWABLE  
AND

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

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS  
(Marathon is operator of the Indian Basin Unit Gas Plant and Gathering System. Natural Gas Pipeline Co. of America is purchaser of the gas under contracts providing for delivery of residue gas at the plant.)

Operator ROBERT N. ENFIELD	
Address P. O. Box 2431, Santa Fe, New Mexico 87501	
Reason(s) for filing (Check proper box)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input checked="" type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name and address of previous owner

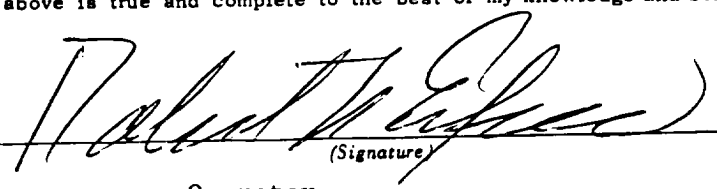
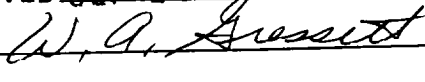
Lease Name West Indian Basin Unit Gas Com.		Lease No. 2	Well No. 2	Pool Name, Including Formation Indian Basin-Upper Penn/Gas	Kind of Lease State, Federal or Fee Federal
Location					
Unit Letter G	1980	Feet From The North	Line and 1650	Feet From The East	
Line of Section 20	Township 21 South	Range 23 East	NMPM,	Eddy	County

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 Co. operator Indian Basin Gas Plant and Gathering System		Box 1324, 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)	
Gas Company of New Mexico, Marathon Oil Co., Operator, Indian Basin Gas Plant & Gathering System		Box 1419, Carlsbad, New Mexico	
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.	Is gas actually connected? No-Gas Co. of N. M.	When Approx. 2-26-66
		Yes-Nat. Gas Pipeline	1-26-66

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

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
			X	X					
Date Spudded January 9, 1965	Date Compl. Ready to Prod. March 28, 1965	Total Depth 7680'		P.B.T.D. 7430'					
Elevations (DF, RKB, RT, GR, etc.) 4003' DF	Name of Producing Formation Cisco Canyon Dolo.	Top Oil/Gas Pay 7180'		Tubing Depth 7100'					
Perforations 7176-87; 7192-94; 7200-09; 7214-31; 7236-45; 7254-62				Depth Casing Shoe					
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT					
17 1/2"	13-3/8" Casing	188'		200 sacks					
12 1/4"	8-5/8" Casing	1882'		900 sacks					
7-7/8"	4-1/2" Casing	7665'		300 sacks					

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 8,113	Length of Test 4 hours	Bbls. Condensate/MMCF 10 bbls.	Gravity of Condensate 58.60
Testing Method (pitot, back pr.) Multi-point back pressure test	Tubing Pressure 1667#	Casing Pressure 1937#	Choke Size 25/64

VI. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
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.		APPROVED SEP 10 1976	
 Operator (Title)		BY  TITLE SUPERVISOR, DISTRICT II	
8/30/76 (Date)		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.	