District i PO Box 1980, Hobbs, NM 82241-1980

rict i Box 1980, Hobbs, NM 88	241-1 960	 E	State nergy, Minera	e of New	Mexico				ed February 10, 199
ict II Frawer DD, Artesia, NM	88211-9719	OI	L CONS	ERVATI	ON DIVIS	ION	Subm	it to Appro	opriate District Office 5 Copi
zi III Rio Brazzo Rd., Aziec,		J -		PO Box 2	088 7504-2088		C 2 400 Å	_	•
at IV							18 1994		MENDED REPOR
ж 2088, Sama Fe, NM RI	EQUEST	FOR AL	LOWAE	BLE AND	AUTHOR	IZAT	ION TO TR	ANSPO	RT
	۱ ٥	perater nam	e and Address	•			01402	OGRAD !	
Marathon C P O Box 55		pany ✓					³ Reason for Fling Code		
	7970)2				·	СН		
' API Number					at Name			75	· Pool Code
• 0 15-10355		Ind:	ian Bas	sin Mor	row			110	' Well Number
Property Code		Ind	ian Fed	deral C	•			1	
10 Surface	ocation								
r lot no. Section	Township	Range	Lot.lda	Feet from U		outh Line	Feet from the	East/West	Eddy
G 19	218	24E		1980	Nor	th	1980	East	Eddy
Bottom I	Hole Local	Reage	Let Ida	Feet from 4	be North/6	iouth äne	Fost from the	East/West	i i
or lot Bo. Section G 19	215	24E	_	1980	1	rth	1980	East	
se Code " Producis	ng Mahad Code	" Gas (Connection De	4e ' C-12	9 Permit Number		C-129 Effective	Date	17 C-129 Expiration Det
Flo									
Oil and Gas		ransporter N			" POD	2 O/G	<u> </u>	POD ULST	
OGRID		and Address		,, , ,	Λι. ΩΙ /	0	G-19	21S	24E
V	Maratho P O Box	_	Compan		01010810)			
C Martin	Midland		79702				G - 19	21S	24E
014035	Maratho P O Box	on Oil	Compa	any 20	106830	G] G - 19	210	241
2.50	P O DOM				•				
	Midland		79702			1 - 2 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -			
	Midland			,					
	Midland				an . 				
	Midland								
				2					
							Description		
Produced Ware			79702		Arris de la companya		Description		
	ater G	l Tx	79702	24E	POD ULSTR Lee				
" POD 216685	ater G	l Tx	79702 21S	24E	Arris de la companya		Description ** FBTD		¹⁷ Perforations
Well Complet Speed Date	ater G tion Data	19 ** Rendy De	79702 21S	24E	POD ULSTR Lee		* FBTD	1	²⁹ Perforations * Sacks Coment
" POD 21685 Well Complet	ater G tion Data	19 ** Rendy De	79702 21S	24E	POD ULSTR Lee		* FBTD	12	
Well Complete Speed Date	ater G tion Data	19 ** Rendy De	79702 21S	24E	POD ULSTR Lee		* FBTD		
Well Complet "Speed Date	ater G tion Data	19 ** Rendy De	79702 21S	24E	POD ULSTR Lee		× ratu		
Well Complete Speed Date	ater G tion Data	19 ** Rendy De	79702 21S	24E	POD ULSTR Lee		× ratu		
Well Complet Speed Date Hole Size	ater G tion Data	19 ** Rendy Do	79702 21S	24E	POD ULSTR Lee	Depth S	× ratu		
Well Complet Speed Date Hole Size	ater G tion Data	19 ** Rendy De	79702 21S	24E	TD	Depth S	* F51)		Socks Coment
Well Complete "Speed Date "Hole Size	ater G tion Data ata Gas Del	19 ** Rendy Do	21S	24E	TD	Depth S	* F51)	ressure	Socks Coment
Well Complet "Spud Date "Hole Size Well Test D: "Date New Oil "Choke Size	ater G G G G G G G G G G G G G	19 ** Rendy De	21S	2 4 E	TD Test i	Depth S	* FSTD	ressure	Socks Coment ** Cog. Pressure.
Well Complet "Spud Date "Hole Size Well Test D: "Date New Oil "Choke Size	ater G tion Data ata Gas Det	19 ** Rendy De ** Coli	21S Lasing & Tubi	2 4 E	TD Test i	Depth S	* FSTD	resoure OF	** Cag. Pressure.
Well Complet "Speed Date "Hole Size "Hole Size "Choke Size hereby certify that the related that the information wicking and belieff	ata Gas Dei	19 ** Ready Delay	21S Lasing & Tubi	24E rest Date Water cen complied of my	TD Test I	Depth S	* FSTD et * Tog. # ONSERVAT	resoure OF	* Cag. Pressure
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IF THIS IS AN AMENDED REPORT. CHECK THE BOX LABLED TAMENDED REPORT" AT THE TOP OF THIS DOCUMENT

Report all gas volumes at 15,025 PSIA at 60°.. Report all oil volumes to the nearest whole barrel.

A request for allowable for a newly drilled or deepened well must be accompanied by a tabulation of the deviation tests conducted in accordance with Rule 111.

All sections of this form must be filled out for allowable requests on new and recompleted we

Fill out only sections i, ii, iii, IV, and the operator certifications for changes of operator, property name, well number, transporter, or other such changes.

A separate C-104 must be filed for each pool in a multiple completion.

Improperly filled out or incomplete forms may be returned to operators unapproved.

- Operator's name and address
- Operator's OGRID number. If you do not have one it will be assigned and filled in by the District office. 2.

Reason for filing code from the following table:

NW New Well

RC Recompletion

CH Change of Operator

AO Add oil/condensate transporter

CO Change oil/condensate transporter

AG Add ges transporter

CG Change gas transporter

RT Request for test allowable (Include volume requested)

If for any other reason write that reason in this box.

- The API number of this well
- 5. The name of the pool for this completion
- R The pool code for this pool
- The property code for this completion
- 8. The property name (well name) for this completion
- 9. The well number for this completion
- The surface location of this completion NOTE: If the United States government survey designates a Lot Number for this location use that number in the 'UL or lot no.' box. Otherwise use the OCD unit letter. 10.
- 11. The bottom hole location of this completion
- 12. ease code from the following table:

Federa State

Jicarilla

NU

Navajo Ute Mountain Ute Other Indian Tribe

The producing method code from the following table: Flowing 13. Flowing Pumping or other artificial lift

MO/DA/YR that this completion was first connected to a gas transporter

- 15. The permit number from the District approved C-129 for
- MO/DA/YR of the C-129 approval for this completion 16.
- 17. MO/DA/YR of the expiration of C-129 approval for this
- completion
- 18. The gas or oil transporter's OGRID number
- Name and address of the transporter of the product 19.
- The number assigned to the POD from which this product will be transported by this transporter. If this is a new well or recompletion and this POD has no number the district office will assign a number and write it here. 20.
- Product code from the following table:
 O Oil
 G Gas 21.

- T' a ULSTR location of this POD if it is different from the well completion location and a short description of the POD (Example: "Battery A", "Jones CPD",etc.) 22.
- The POD number of the storage from which water is moved from this property. If this is a new well or recompletion and this POD has no number the district office will assign a number and write it here.
- The ULSTR location of this POD if it is different from the well completion location and a short description of the POD (Example: "Battery A Water Tank", "Jones CPD Water 24. (Example: Tank ,etc.)
- 25. MO/DA/YR drilling commenced
- MO/DA/YR this completion was ready to produce 26.
- 27 Total vertical depth of the well
- Plugback vertical depth
- Top and bottom perforation in this completion or casing shoe and TD if openhole 29.
- Inside diameter of the well bore
- 31. Outside diameter of the casing and tubing
- Depth of casing and tubing. If a casing liner show top and
- Number of sacks of cement used per casing string 33

The following test data is for an oil well it must be from a test conducted only after the total volume of load oil is recovered.

- 34. MO/DA/YR that new oil was first produced
- 35. MO/DA/YR that gas was first produced into a pipeline
- 36. MO/DA/YR that the following test was completed
- 37. Length in hours of the test
- Flowing tubing pressure oil welk Shut-in tubing pressure gas well 38.
- 39. Flowing casing pressure - oil wells Shut-in casing pressure - gas wells
- 40. Diameter of the choke used in the test
- 41. Barrels of oil produced during the test
- Barrels of water produced during the test 42.
- 43. MCF of gas produced during the test
- 44 Gas well calculated absolute open flow in MCF/D
- 45. The method used to test the well:

Flowing

P Pumping
S Swabbing
If other method please write it in.

- The signature, printed name, and title of the person authorized to make this report, the date this report was signed, and the telephone number to call for questions about this report 46.
- The previous operator's name, the signature, printed name, and title of the previous operator's representative authorized to verify that the previous operator no longer operates this completion, and the date this report was signed by that named. signed by that person