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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
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 Gas Plant and Gathering System. Natural Gas Pipeline Company of America is purchaser of the gas under contracts providing for delivery of residue gas at the Plant.)

RECEIVED

Operator	JOHN H. TRIGG
Address	Post Office Box 520, Roswell, New Mexico 88201
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>
	Dry Gas <input checked="" type="checkbox"/>
	Condensate <input type="checkbox"/>

O. G. C.
ARTESIA, OFFICE

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	FEDERAL "IB"	Well No.	2	Pool Name, including Formation	INDIAN BASIN, PENN-CISCO	New Mexico 05699	Kind of Lease	FEDERAL
Location	Unit Letter F ; 1650 Feet From The NORTH Line and 1650 Feet From The WEST							
	Line of Section 7 , Township 22 SOUTH Range 24 EAST , NMPM, EDDY County							

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

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, OPERATOR, INDIAN BASIN GAS PLANT AND GATHERING SYSTEM	Post Office 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)
MARATHON OIL COMPANY, OPERATOR, INDIAN BASIN GAS PLANT AND GATHERING SYSTEM	Post Office Box 1324, Artesia, New Mexico
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
F 7 22S. 24E.	NO

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'v.	Diff. Res'v.
		XX	XX					
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
8/23/65	10/27/65	8025	NONE					
Pool	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
INDIAN BASIN	PENN-CISCO	7598	7272					
Perforations	7602 - 7645 - 1 11/16" - 86						Depth Casing Shoe	
	7661 - 7718 - 1 11/16" - 114 (2/ft.)						8025	
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17 1/2"	13 3/8"		200 KBM		250			
11"	8 5/8"		3400 KBM		1725			
7 7/8"	4 1/2"		8025 KBM		400			
	2 3/8"		7272		Tubing			

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

FOUR POINT TEST WILL BE TAKEN UPON PIPELINE CONNECTION.

GAS WELL RESULTS WILL BE REPORTED TO OCC.

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Est. 11,000 MCF/GPD	--	--	--
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size
Flow Test	1900	--	1/2"

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.

John H. Trigg
(Signature)
OWNER

DECEMBER 30, 1965

(Date)

OIL CONSERVATION COMMISSION

APPROVED JAN 26 1966 , 19

BY M. L. Armstrong

TITLE OIL AND GAS INSPECTOR

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.