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| TRANSPORTER            |
| OIL                    |
| GAS                    |
| OPERATOR               |
| PRORATION OFFICE       |

## NEW MEXICO OIL CONSERVATION COMMISSION

## REQUEST FOR ALLOWABLE

AND

## 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.)

Form C-104  
Supersedes Old C-104 and C-110  
Effective 4-1-65

JOHN H. TRIGG

(COMMUNITIZATION AGREEMENT NO. SW-286)

Address

Post Office Box 520, Roswell, New Mexico 88201

Reason(s) for filing (Check proper box)

New Well

XX

Change in Transporter of:

Recompletion

Oil

Dry Gas

XX

Change in Ownership

Casinghead Gas

Condensate

Contract - New Mexico  
11/6/65

If change of ownership give name  
and address of previous owner

## II. DESCRIPTION OF WELL AND LEASE

New Mexico 05699

|                               |                        |                                |               |
|-------------------------------|------------------------|--------------------------------|---------------|
| Lease Name                    | Well No.               | Pool Name, Including Formation | Kind of Lease |
| FEDERAL AZOTEA MESA (see map) | 1                      | INDIAN BASIN, PENN-CISCO       | FEDERAL       |
| Location                      | State, Federal or Free |                                |               |
| Unit Letter                   | D                      | 743                            | Feet From The |
| Line of Section               | 8                      | Township                       | 22 SOUTH      |
| Range                         | 24 EAST                | NMPM                           | EDDY          |

## III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

|   |               |  |
|---|---------------|--|
| Name of Authorized Transporter of Oil                                       | or Condensate | 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 | XX            | Post Office Box 1324, Artesia, New Mexico                                |
| Name of Authorized Transporter of Casinghead Gas                            | or Dry Gas    | 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 | XX            | Post Office Box 1324, Artesia, New Mexico                                |
| If well produces oil or liquids, give location of tanks.                    | Unit          | Sec.   |
|   | D             | 8  |
|   | 22S.          | 24E.   |
| Is gas actually connected?  | When          |  |
| 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'ty. | Diff. Res'ty. |
|                                      |                             | XX              | XX                    |          |        |           |              |               |
| Date Spudded                         | Date Comp'l. Ready to Prod. | Total Depth     | P.B.T.D.              |          |        |           |              |               |
| 5/21/65                              | 8/27/65                     | 10,230          | 8352                  |          |        |           |              |               |
| Pool                                 | Name of Producing Formation | Top Oil/Gas Pay | Tubing Depth          |          |        |           |              |               |
| INDIAN BASIN                         | PENN-CISCO                  | 7,861           | 7772                  |          |        |           |              |               |
| Perforations                         | Depth Casing Shoe           |                 |                       |          |        |           |              |               |
| 7864 - 7970 - 1 11/16" - 212         | 8352                        |                 |                       |          |        |           |              |               |
| TUBING, CASING, AND CEMENTING RECORD |                             |                 |                       |          |        |           |              |               |
| HOLE SIZE                            | CASING & TUBING SIZE        | DEPTH SET       | SACKS CEMENT          |          |        |           |              |               |
| 17 1/2"                              | 13 3/8"                     | 357             | 135 + 4 YDS READY MIX |          |        |           |              |               |
| 12 1/4"                              | 9 5/8"                      | 3500            | 1600                  |          |        |           |              |               |
| 8 3/4"                               | 5 1/2"                      | 8352            | 600                   |          |        |           |              |               |
|                                      | 2 3/8"                      | 7772            | 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. 4,000 MCF/GPD               | 36 Min.         | --                    | --                    |
| Testing Method (pitot, back pr.) | Tubing Pressure | Casing Pressure       | Choke Size            |
| Drillstem Test                   | ---             | --                    | 1"                    |

## 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)  
OPERATOR  
(Title)

DECEMBER 30, 1965

(Date)

## OIL CONSERVATION COMMISSION

APPROVED JAN 7, 1966, '9  
BY M. J. [Signature]  
TITLE Assistant Commissioner

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