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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)

Operator Marathon Oil Company		RECEIVED APR 1 1966 O. C. C. ARTESIA, OFFICE
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 of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
Incompletion <input type="checkbox"/>		
Change in Ownership <input type="checkbox"/>		

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Federal IBB Gas "Com"	Well No. 1	Pool Name, Including Formation Indian Basin - Upper Penn Gas	Kind of Lease State, Federal or Fee Federal
Location Unit Letter F ; 1650 Feet From The north Line and 1650 Feet From The west Line of Section 14 , Township 22S Range 23E , 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"/> Marathon Oil Company, Operator, Indian Basin Gas Plant and Gathering System	Address (Give address to which approved copy of this form is to be sent) Box 1324 Artesia, New Mexico					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Marathon Oil Company, Operator, Indian Basin Gas Plant and Gathering System	Address (Give address to which approved copy of this form is to be sent) Box 1324 Artesia, New Mexico					
If well produces oil or liquids, give location of tanks.	Unit F	Sec. 14	Twp. 22S	Rge. 23E	Is gas actually connected? No	When

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.
		X	X					
Date Spudded 3-3-66	Date Compl. Ready to Prod. 4-11-66	Total Depth 7680		P.B.T.D. 7653				
Pool Indian Basin	Name of Producing Formation Upper Penn Gas	Top Oil/Gas Pay 7543		Tubing Depth 7505				
Perforations 7543 - 7564				Depth Casing Shoe 7678				
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/2"	13-3/8"		150'		325			
11"	8-5/8"		2123'		1735			
7-7/8"	5-1/2"		7678'		1045			
	2-3/8"		7505'					

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)

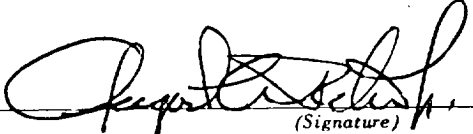
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D 15,187 CAOPF	Length of Test 4 hrs	Bbls. Condensate/MMCF 18.6	Gravity of Condensate 60° API
Testing Method (pitot, back pr.) Back Pr.	Tubing Pressure 1958 - 2270#	Casing Pressure Packer	Choke Size 11.5/64" to 21/64"

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.


(Signature)
Area Supt.
(Title)
4-13-66
(Date)

OIL CONSERVATION COMMISSION

APPROVED MAY 1 1966, 19
BY M. L. Armstrong
TITLE ASST. DIR. OIL FIELD

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.