

District I  
O Box 1980, Hobbs, NM 88241-1980  
District II  
O Drawer DD, Artesia, NM 88211-0719  
District III  
000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
O Box 2088, Santa Fe, NM 87504-2088

State of New Mexico  
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION  
PO Box 2088  
Santa Fe, NM 87504-2088

Form C-104  
Revised February 10, 1994  
Instructions on back  
Submit to Appropriate District Office  
5 Copies

☐ AMENDED REPORT

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

Operator name and Address <b>MARALO, INC. P. O. BOX 832 MIDLAND, TX 79702</b>		OGRID Number <b>014007</b>
		Reason for Filing Code <b>RT ALLOWABLE FOR 800 BBLS FOR JUNE 94.</b>
API Number <b>30 - 0 15-22218</b>	Pool Name <b>UNDESIG. (BONE SPRING)</b>	Pool Code
Property Code <b>006345</b>	Property Name <b>KEYSTONE</b>	Well Number <b>1</b>

II. Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West line	County
<b>6</b>	<b>32</b>	<b>20S</b>	<b>28E</b>		<b>1980</b>	<b>NORTH</b>	<b>1980</b>	<b>EAST</b>	<b>EDDY</b>

Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
Lac Code <b>P</b>	Producing Method Code <b>F</b>	Gas Connection Date <b>5-19-94</b>	C-129 Permit Number	C-129 Effective Date	C-129 Expiration Date				

III. Oil and Gas Transporters

Transporter OGRID	Transporter Name and Address	POD	O/G	POD ULSTR Location and Description
<b>000747</b>	<b>AMOCO PIPELINE LTD 502 NW AVENUE LEVELLAND, TX 79336</b>		<b>COND</b>	
<b>015629</b>	<b>NATURAL GAS PIPELINE CO. OF AMERICA P. O. BOX 283 HOUSTON, TX 77027</b>	<b>1240930</b>	<b>G</b>	

IV. Produced Water

POD	POD ULSTR Location and Description
<b>1249500</b>	

V. Well Completion Data

Spud Date	Ready Date	TD	PBTD	Perforations
<b>REENTER 03-04-94</b>	<b>03-24-94</b>	<b>10,500'</b>	<b>6725'</b>	<b>6298 - 6503'</b>
Hole Size	Casing & Tubing Size	Depth Set	Sacks Cement	
<b>17-1/2</b>	<b>13-3/8"</b>	<b>608</b>	<b>695 SX CL. C</b>	
<b>12-1/4</b>	<b>8-5/8</b>	<b>3010</b>	<b>900 SX LT &amp; 200 SX CL C</b>	
<b>7-7/8</b>	<b>4-1/2</b>	<b>11595</b>	<b>875 SX CL H</b>	

VI. Well Test Data

Date New Oil	Gas Delivery Date	Test Date	Test Length	Tbg. Pressure	Csg. Pressure
<b>03-24-94</b>	<b>5-20-94</b>				
Choke Size	Oil	Water	Gas	AOF	Test Method

I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature: *Dorothea Owens*

Printed name: **DOROTHEA OWENS**

Title: **REGULATORY ANALYST**

Date: **JUNE 1, 1994**

Phone: **(915) 684-7441**

OIL CONSERVATION DIVISION

Approved by:

**JUN 2 1994**

Title:

Approval Date:

**SUPERVISOR, DISTRICT II**

If this is a change of operator fill in the OGRID number and name of the previous operator

Previous Operator Signature

Printed Name

Title

Date