

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

# OIL CONSERVATION DIVISION

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

RECEIVED

DEC 16 1993

## REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator <b>MARALO, INC.</b>		Well API No. <b>30-015-25787</b>
Address <b>P. O. BOX 832, MIDLAND, TX 79702</b>		
Reason(s) for Filing (Check proper box) New Well <input type="checkbox"/> Change in Transporter of: <input checked="" type="checkbox"/> Other (Please explain) Recompletion <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> <b>EFFECTIVE DECEMBER 1, 1993</b> Change in Operator <input checked="" type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>		
If change of operator give name and address of previous operator <b>BETTIS, BOYLE &amp; STOVALL, P. O. BOX 1240, GRAHAM, TX 76046</b>		

### II. DESCRIPTION OF WELL AND LEASE

Lease Name <b>PICKETT DRAW FEDERAL</b>	Well No. <b>1</b>	Pool Name, Including Formation <b>RUSTLER BLUFF (MORROW)</b>	Kind of Lease State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> or Fee	Lease No. <b>USA NM-15303</b>
Location Unit Letter <b>F</b> : <b>660</b> Feet From The <b>NORTH</b> Line and <b>1980</b> Feet From The <b>WEST</b> Line Section <b>9</b> Township <b>25S</b> Range <b>29E</b> , <b>NMPM</b> , <b>EDDY</b> County				

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

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> <b>N/A</b>	Address (Give address to which approved copy of this form is to be sent)					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> <b>EL PASO NATURAL GAS COMPANY</b>	Address (Give address to which approved copy of this form is to be sent) <b>P. O. BOX 1492, EL PASO, TX 79978</b>					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected? <b>YES</b>	When? <b>01-08-88</b>

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
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing Shoe			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

### 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 Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size <b>1-14 9/16</b>
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF <b>1000</b>

### GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (puce, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

### VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations 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.

Dorothea Owens  
Signature  
**DOROTHEA OWENS**  
Printed Name  
**DECEMBER 8, 1993**  
Date  
**REGULATORY**  
Title  
**(915) 684-7441**  
Telephone No.

### OIL CONSERVATION DIVISION

Date Approved **DEC 21 1993**

By \_\_\_\_\_

Title **SUPERVISOR, DISTRICT II**

### INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

Form 3160-5  
(June 1990)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

MARALO, INC.

3. Address and Telephone No.

P. O. BOX 832, MIDLAND, TX 79702

(915) 684-7441

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

660' FNL & 1980' FWL  
SEC. 9, T25S, R29E

FORM APPROVED

Budget Bureau No. 1004-0135  
Expires: March 31, 1993

5. Lease Designation and Serial No.

USA NM-15303

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

PICKETT DRAW FEDERAL #1

9. API Well No.

30-015-25767

10. Field and Pool, or Exploratory Area

UNDESIGNATED (BONE SPRING)

11. County or Parish, State

EDDY, NM

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☒ Notice of Intent  
☐ Subsequent Report  
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment  
☒ Recompletion PROPOSED  
☐ Plugging Back  
☐ Casing Repair  
☐ Altering Casing  
☐ Other

- ☐ Change of Plans  
☐ New Construction  
☐ Non-Routine Fracturing  
☐ Water Shut-Off  
☐ Conversion to Injection  
☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

RECOMPLETION IN 2ND BONE SPRING SAND.

1. RUPU. KILL WELL. RELEASE BAKER LOK-SET PKR SET @ 11,076'. TOH W/2-7/8" TBG & BAKER LOK-SET PKR.
2. RU WIRELINE. TIH W/ 7-5/8" CIBP. SET @ ±11,050'. CAP W/35' CMT.
3. RUN GR/CBL/CCL FROM 9800' TO TOC. CORRELATE TO DRESSER OH CR/CNL/Z-DENS. RUN 8-12-87.
4. TIH W/TBG OPEN-ENDED, TO 9888'. SPOT 100' CMT PLUG FROM 9888' TO 9788' (ACROSS TOP OF 7-5/8" LINER). PULL TBG UP AND WOC. DROP DOWN & TAG PLUG. ADD CMT TO PLUG IF NECESSARY. IF DICTATED BY BOND LOG, SQUEEZE ACROSS PERF INTERVAL AS NEEDED.
5. PU TO 8641'. SPOT 300 GALS 7 1/2% MUD REMOVAL ACID, DOUBLE INHIBITED, FROM 8641' TO 8543'. TOH W/TBG.
6. RU PERFORATORS USING 4" CARRIER GUNS, LOADED W/PREMIUM CHARGES & PERF 1 JSPF, @ 8573', 8575', 8581', 8587', 8589', 8591', 8601', 8607', 8611', 8613', 8617', 8619', 8621', 8626', 8629', 8631', 8633', 8637', 8639', 8641', (TOTAL OF 20 HOLES).
7. TIH W/9-5/8" PKR TO ± 8500'. SET PKR. BREAKDOWN PERFS BY PUMPING AWAY SPOT ACID.
8. CONTINUE TREATMENT OF PERFS 8573 - 8641' BY PUMPING 1000 GALS 7 1/2% MUD REMOVAL ACID CARRYING 40 BALL SEALERS DOWN TBG AT A RATE OF ± 4BPM. IF BALLOUT OCCURS, SURGE OFF BALLS AND FINISH TREATMENT.

SEE ATTACHED PAGE

14. I hereby certify that the foregoing is true and correct

Signed Donna L. Stevens

Title REGULATORY

Date DECEMBER 22, 1993

(This space for Federal or State office use)

Approved by A. Jam Salameh  
Conditions of approval, if any:

Title Petroleum Engineer

Date 1/19/94

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

\*See Instruction on Reverse Side