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NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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

I.

Operator Northern Minerals, Inc.	
Address P. O. Box 2182; Santa Fe, New Mexico 87501	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Marcelina	Well No. 1	Pool Name, Including Formation Wildcat - Dakota "A" sand	Kind of Lease State, Federal or Fee federal	Lease No. NM 12201
Location				
Unit Letter A ; 330 Feet From The North Line and 330 Feet From The East				
Line of Section 24 Township 16N Range 10 W , NMPM, McKinley County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Permian Corporation	202 Petroleum Plaza Bld., Farmington, N.M.	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
If well produces oil or liquids, give location of tanks.		
Unit A	Sec. 24	Twp. 16N
Pge. 10W	Is gas actually connected? No	
When no gas sales outlet in area		

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 5/19/75	Date Compl. Ready to Prod. 6/16/75		Total Depth 1750		P.B.T.D. 1750				
Elevations (DF, RKB, RT, GR, etc.) 7164 GR	Name of Producing Formation Dakota "A" sand		Top Oil/Gas Pay 1728		Tubing Depth 1742				
Perforations open hole 1728-50				Depth Casing Shoe 1728					
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
8 3/4		7" - 20#		66'		25 sx class "G"			
6 1/4		4 3/4" - 16#		1728'		95 sx class "G"			

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 6/16/75	Date of Test 6/19/65	Producing Method (Flow, Pump, gas lift, etc.) flow	
Length of Test 24 hrs	Tubing Pressure 20 PSIG	Casing Pressure 210 PSIG	Choke Size 22/64"
Actual Prod. During Test 100 bbls	Oil - Bbls. 70	Water - Bbls. 30	Gas - MCF est. 35

GAS WELL

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

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.

Lloyd Davidson  
Lloyd Davidson (Signature)

President (Title)  
6/23/75 (Date)

OIL CONSERVATION COMMISSION

APPROVED JUN 27 1975  
BY Original Signed by Emery C. Arnold  
TITLE SUPERVISOR DIST. #3

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 only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.