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TRANSPORTER	OIL 1 GAS 1
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PRORATION OFFICE	

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	Marathon Oil Company		
Address	P. O. Box 97, McFadden, Wyoming 82080		
Reason(s) for filing (Check proper box)	Other (Please explain)		
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"/>	

If change of ownership give name  
and address of previous owner \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Jicarilla Apache	12	Basin Dakota	State, Federal or Fee Federal	
Location				
Unit Letter	A	800 Feet From The North Line and	800 Feet From The East	
Line of Section	33	Township 26N	Range 5 W	NMPM, Rio Arriba 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"/>	Address (Give address to which approved copy of this form is to be sent)					
Rock Island Oil & Refining Company, Inc.	321 West Douglas, Wichita, Kansas					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
El Paso Natural Gas Company	P. O. Box 990, Farmington, New Mexico					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	A	33	26N	5W	No	Will be connected in the near future.

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.
		XX	XX					
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
February 6, 1967	March 11, 1967		7355		7330			
Elevations (11F, RKB, RT, GR, etc.)	Name of Producing Formation		Top XX/Gas Pay		Tubing Depth			
6541 GR, 6554 RKB	Dakota Sandstone		7074		7057			
Perforations	7077-7084, 7207-7212, 7217-7222, 7238-7244, 7251-7255, 7293-7296 & 7299-7303				Depth Casing Shoe			
7352								
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
1 1/2"	10 3/4", 32.75#		413		475 sacks-cement to sur-			
9 5/8	7 5/8 24#		2990		600 " " " face			
6 3/4	4 1/2 11.60#		7352		500 " -cement top 2760			
	2 3/8, 4.70#, EU tbg		7057					

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 allow-  
able for this depth or be for full 24 hours)

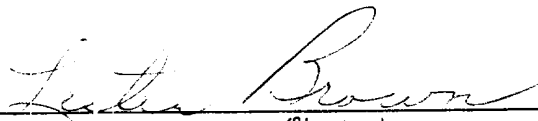
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL Initial test conducted by Tefteller, Inc., on March 11, 1967

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
4204	3 hours	unknown	unknown
Testing Method (pitot, back pr.)	Tubing Pressure (psig)	Casing Pressure (psig)	Choke Size
back pressure	330 psig	736 psig	3/4"

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 Superintendent  
(Title)  
April 13, 1967  
(Date)

OIL CONSERVATION COMMISSION  
MAY 17 1967  
APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY Original Signed by Emery C. Arnold  
TITLE SUPERVISOR 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 allow-  
able 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.  
Separate Forms C-104 must be filed for each pool in multiply  
completed wells.

MARATHON OIL COMPANY

Jicarilla Apache Well # 12  
Section 33, T26N, R5W  
Rio Arriba County, New Mexico

Deviation Record

<u>Depth</u>	<u>Deviation (Degrees)</u>
120'	1/2°
563'	1 3/4°
1051'	1 1/4°
1551'	2 °
2551'	1 1/2°
3321'	2 °
3811'	1 °
4800'	1/2°
5300'	3/4°
5800'	2 1/2°
6300'	1/2°
6800'	1 1/2°
7300'	3 1/2°

