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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
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

Operator Marathon Oil Company	
Address P.O. Box 2659, Casper, WY 82602	
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 Jicarilla Apache	Well No. 11E	Pool Name, including Formation Basin Dakota	Kind of Lease Tract 251 State, Federal or Fee Contract	Lease No. 000154
Location				
Unit Letter <u>C</u> ; <u>955</u> Feet From The <u>North</u> Line and <u>1,685</u> Feet From The <u>West</u>				
Line of Section <u>28</u> Township <u>26N</u> Range <u>5W</u> , NMPM, <u>Rio Arriba</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> Plateau Inc.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 108, Farmington, NM 87401	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> Northwest Pipeline Corp.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 90, Farmington, NM 87401	
If well produces oil or liquids, give location of tanks.	Unit None	Sec. None
Twp. None	Rge. None	Is gas actually connected? No
		When April 1, 1981

If this production is commingled with that from any other lease or pool, give commingling order number: None

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Rest'v.	Diff. Rest'v.
		X	X					
Date Spudded 9-12-80	Date Compl. Ready to Prod. 2-6-81	Total Depth 7,337'		P.B.T.D. 7,270'				
Elevations (DF, RKB, RT, CR, etc.) 6,470' GL, 6,482' KB	Name of Producing Formation Graneros Dakota	Top Oil/Gas Pay 7,041'-7,047' 7,171'-7,269'		Tubing Depth 7,024'				
Perforations .32 1 Shot/ft 7,041'-44, 47, 7,171'-75, 82, 7,203'-05, 57, 63, 69		Depth Casing Shoe						
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT				
13-3/4"	9-5/8" 36#	494'		450				
8-3/4"	7" 20#	3,037'		250				
6-1/4"	4-1/2" 11.6#, 10.5#	7,335'		220				

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, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D 403	Length of Test 24 Hours	Bbls. Condensate/MMCF .0347	Gravity of Condensate 56.6
Testing Method (pitot, back pr.) Orifice	Tubing Pressure (Shut-in) 1,480 psig	Casing Pressure (Shut-in) 1,700 psig	Choke Size 48/64"

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.

Edith Cordery  
(Signature)  
District Operations Manager  
(Title)  
March 3, 1981  
(Date)

OIL CONSERVATION COMMISSION  
APPROVED MAR 5 1981, 19  
BY Original Signed by FRANK T. CHAVEZ  
TITLE SUPERVISOR DISTRICT #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.  
Separate Forms C-104 must be filed for each pool in multiple