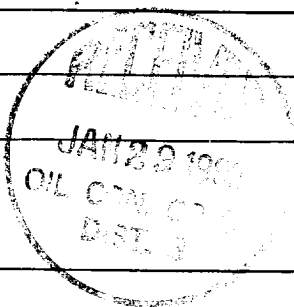


DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OFFICE			

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)	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		This well is dual completed		
Lease Name Jicarilla Apache	Well No. 8E	Pool Name, including Formation Graneros - Dakota	Kind of Lease Tract 251 State, Federal or Fee Contract	Lease No. 000154
Location				
Unit Letter K	Feet From The 1,685	South	Line and 1,685	Feet From The West
Line of Section 27	Township 26N	Range 5W	, 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)			
Plateau Inc.	P.O. Box 108 Farmington, NM 87401			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)			
Northwest Pipeline Corporation	P.O. Box 90 Farmington, NM 87401			
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.
				Is gas actually connected? No

If this production is commingled with that from any other lease or pool, give commingling order number:

V. COMPLETION DATA	
Designate Type of Completion - (X)	Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> New Well <input checked="" type="checkbox"/> Workover <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Same Res'tv. <input type="checkbox"/> Diff. Res'tv. <input type="checkbox"/>
Date Spudded 8-23-81	Date Compl. Ready to Prod. 1-13-82
Elevations (DF, RKB, RT, GR, etc.) 6,660' GL, 6,673' KB	Name of Producing Formation Graneros-Dakota
Perforations	Top Oil/Gas Pay 7,250'-7,490'
TUBING, CASING, AND CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE
13-3/8"	9-5/8"
7-7/8"	4-1/2"
	2-3/8"
DEPTH SET	
504'	
7,585'	
7,249'	
SACKS CEMENT	
285	
1,509'	

VI. 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, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL Graneros - Dakota			
Actual Prod. Test-MCF/D 793	Length of Test 24 hour	Bbls. Condensate/MMCF .0063	Gravity of Condensate .630
Testing Method (pilot, back pr.) Orifice	Tubing Pressure (Shut-in) 1,485 psig	Casing Pressure (Shut-in) -	Choke Size 24/64"

I. 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.	
District Operations Manager	
January 14, 1982	

OIL CONSERVATION COMMISSION	
APPROVED JAN 29 1982	
BY Original Signed by FRANK T. CHAVEZ	
SUPERVISOR DISTRICT #3	
TITLE	
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 multiply completed wells.	