

## OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

|                        |     |
|------------------------|-----|
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| SANTA FE               |     |
| FILE                   |     |
| U.S.G.S.               |     |
| LAND OFFICE            |     |
| TRANSPORTER            | OIL |
|                        | GAS |
| OPERATOR               |     |
| PRODUCTION OFFICE      |     |

Operator  
Marathon Oil CompanyAddress  
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"/> |
| Change in Ownership | <input type="checkbox"/>            | Casinghead Gas            | <input type="checkbox"/> |
|                     |                                     | Dry Gas                   | <input type="checkbox"/> |
|                     |                                     | Condensate                | <input type="checkbox"/> |

Other (Please explain)

If change of ownership give name  
and address of previous owner

## DESCRIPTION OF WELL AND LEASE

|   |                  |  |  |                     |
|---|------------------|--|--|---------------------|
| Lease Name<br>Jicarilla Apache  | Well No.<br>12-E | Pool Name, Including Formation<br>Dakota | Kind of Lease<br>Tract 251<br>State, Federal or Fee Contract | Lease No.<br>000154 |
| Location<br>Unit Letter <u>J</u> : <u>1,685'</u> Feet From The <u>South</u> Line and <u>1,685'</u> Feet From The <u>East</u><br>Line of Section <u>33</u> Township <u>26N</u> Range <u>5W</u> , NMPM, Rio Arriba County |                  |  |  |                     |

## 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)<br>Petroleum Center, 501 Airport Dr.<br>Suite 114, 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)<br>P.O. Box 90, Farmington, NM 87401                                    |      |      |      |                            |                             |
| If well produces oil or liquids,<br>give location of tanks.  | Unit   | Sec. | Twp. | Rge. | Is gas actually connected? | When                        |
|  |  | None |      |      | No                         | Discretion of Gas Purchaser |

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

## 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<br>9-29-81   | Date Compl. Ready to Prod.<br>3-26-82          | Total Depth<br>7,465'     | P.B.T.D.<br>7,406'     |          |        |           |                             |              |
| Elevations (DF, RKB, RT, GR, etc.)<br>6,586' KB, 6,573' GL                    | Name of Producing Formation<br>Graneros/Dakota | Top Oil/Gas Pay<br>7,085' | Tubing Depth<br>7,027' |          |        |           |                             |              |
| Perforations<br>7,088-7,109', 7,086-7,110', 7,222-7,326', 7,221-7,330' 4 JSPF |  |                           |                        |          |        |           | Depth Casing Shoe<br>7,463' |              |
| TUBING, CASING, AND CEMENTING RECORD  |  |                           |                        |          |        |           |                             |              |
| HOLE SIZE   | CASING & TUBING SIZE                           | DEPTH SET                 | SACKS CEMENT           |          |        |           |                             |              |
| 13-3/4"   | 9-5/8"   | 527'                      | 460 243 CF             |          |        |           |                             |              |
| 7-7/8"  | 4-1/2"   | 7,463'                    | 1,645 2538 CF          |          |        |           |                             |              |
|   | 2-3/8"   | 7,072'                    |                        |          |        |           |                             |              |

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

|   |  |                                    |                               |
|---|--|------------------------------------|-------------------------------|
| Actual Prod. Test-MCF/D<br>857              | Length of Test<br>24 Hours             | Bbls. Condensate/MMCF<br>22        | Gravity of Condensate<br>54.8 |
| Testing Method (piros, back pr.)<br>Orifice | Tubing Pressure (Shut-in)<br>1,800 psi | Casing Pressure (Shut-in)<br>0 psi | Choke Size<br>15/64"          |

## 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.

District Operations Manager

## OIL CONSERVATION DIVISION

APPROVED JUN 21 1982, 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 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.