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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
Petroleum Corporation of Texas
Address
Box 911, Breckenridge, Texas 76024
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of: Oil ☐ Dry Gas ☐
Recompletion ☐ Casinghead Gas ☐ Condensate ☐
Change in Ownership ☐ Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Marshall "B"	Well No. 2	Pool Name, Including Formation Blanco South (PC)	Kind of Lease State, Federal or Fee	Lease No. NM-011808
Location Unit Letter 0 : 850' Feet From The South Line and 1850 Feet From The East Line of Section 14 Township 27N Range 9W, NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> NONE	Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) Box 990, Farmington, New Mexico 87401	
If well produces oil or liquids, give location of tanks.	Unit	Sec. Twp. Rge. Is gas actually connected? When Yes 7/74

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.	D. ff. Res'v.
		X	X					
Date Spudded 4-6-74	Date Compl. Ready to Prod. 5-19-74		Total Depth 2192'		P.B.T.D. 2105'			
Elevations (DF, RKB, RT, GR, etc.) 6076' GR	Name of Producing Formation Pictured Cliffs		Top Oil/Gas Pay 2050'		Tubing Depth 2064'			
Perforations 2075-96'; and 2054-2060'					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	8-5/8" 32#		116'		120 sx. CL B + 2% CC			
6-3/4"	4-1/2" 9.5#		2133'		160 sx. Howco Lite (10% gel) 125 sx. CL B			
6-3/4"	1-1/4"		2064'					

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 Pwn 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 23.3 MCF (560 - 24 hrs)	Length of Test 3 Hrs.	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.) Back Pressure	Tubing Pressure (shut-in) 287#	Casing Pressure (shut-in) 286#	Choke Size 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.

Mary B. Taylor
(Signature)

Production Clerk

(Title)

July 12, 1974

(Date)

OIL CONSERVATION COMMISSION

APPROVED

AUG 14 1974

BY Original Signed by Mary J. Arnold

SUPPLY FOR DIST. AS

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.