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Appropriate District Office Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe. New Mexico 87504-2088

P.O. Drawer DD, Astonia, NM 88210

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS WALLAND NO. 30-045-29007 Marathon Oil Company P.O. Box 552, Midland, Texas, 79702 Other (Please explain) Resson(s) for Filing (Check proper box) Change in Transporter of: X New Well Dry Gas Oil Conde Change in Operator Casingh change of operator give name d address of previous operator II. DESCRIPTION OF WELL AND LEASE Kind of Lease State, Pederal or Pee Federal Well No. | Pool Name, Including Formation Lesse No. SF-078872-A 2R Basin Fruitland Coal Bolack "9" 1700 Feet From The South Line and 1100 Feet From The East Unit Letter San Juan 27 North Range 11 West , NMPM, County Section Township III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Oil or Con Address (Give address to which approved copy of this form is to be sent) eized Transporter of Casing end Gas or Dry Gas X PO Box 4990, Farmintgton New Mexico 87499 El Paso Natural Gas is gas actually connected? Twp Rge. When ? If well produces oil or liquids, give location of teaks. Unit Sec 1-25-94 Yes If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Plug Back Same Res'v Diff Res'v Gas Well New Well Workover Deepen Oil Well Designate Type of Completion - (X) X Total Denth P.B.T.D. Date Compi. Ready to Prod. 2025 2040 1-21-94 11-22-93 Top Oil/Gas Pay **Tubing Dept** Elevations (DF, RKB, RT, GR, etc.) Name of Producing Form 1932 SN @ 1986' GL:6231' KB:6243' **Fruitland Coal** Denth Car 2040' 1932-41, 1966-74 TUBING, CASING AND CEMENTING RECORD SACKS CEMENT DEPTH SET CASING & TUBING SIZE HOLE SIZE 300 Sx, Circ 25 Sx 12 1/4" 8 5/8", 24#, K-55 400 Sx. 2040 5 1/2", 15.5#, k-55 7 7/8" SN @ 1986' V. TEST DATA AND REQUEST FOR ALLOWABLE Producing Method (Flow, pump, gas lift, et) OIL WELL (Test must be after recovery of total volume of load oil and n K G K Date First New Oil Run To Tank Date of Test Tubing Pressure Casing Pressure Leagth of Test FEB - 2 1994 Water - Rhie Off CON. DIV. Actual Prod. During Test Oil - Bhis DIST. 3 **GAS WELL** Gravity of Conde MMC Riste Condens Actual Prod. Test - MCF/D 24 Hrs ٥ 483 im (Shut-ia) Tubing Pressure (Shut-in) sthod (pitot, back pr.) 32/64" 245 245 **Back Pressure** VL OPERATOR CERTIFICATE OF COMPLIANCE OIL CONSERVATION DIVISION 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. Date Approved ___MAR 1 0 1993 Thomas monce By_ Eng. Tech Thomas M. Price

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

Printed Name

Deta

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.

Title.

2) All sections of this form must be filled out for allowable on new and recompleted wells.

Tale

915-687-8324 Telephone No.

- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

SUPERVISOR DISTART #8