

NO. OF COPIES RECEIVED		4
DISTRIBUTION		
SANTA FE		1
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	1
OPERATOR		1
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-111
Effective 1-1-65

I.

Operator Marathon Oil Company	
Address P. O. Box 2659, Casper, Wyoming 82602	
Reason(s) for filing (Check proper box)	
New Well ☒	Change in Transporter of:
Recompletion ☐	Oil ☐ Dry Gas ☐
Change in Ownership ☐	Casinghead Gas ☐ Condensate ☐
Other (Please explain)	

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Ohio "C" Government	Well No. 5	Pool Name, Including Formation Kutz Fruitland	Kind of Lease State, Federal or Fee Federal	Lease No. NM020501
Location				
Unit Letter H ; 1450 Feet From The North Line and 950 Feet From The East				
Line of Section 26 Township 28N Range 11W , NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☐ None	Address (Give address to which approved copy of this form is to be sent) No liquids produced	
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐ El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 990, Farmington, NM 87401	
If well produces oil or liquids, give location of tanks. None	Unit	Sec.
	Twp.	Rge.
	Is gas actually connected? No	
	When	

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.	Diff. Res'v.
		X	X					
Date Spudded 10-1-77	Date Compl. Ready to Prod. 1-24-78	Total Depth 1757'		P.B.T.D. 1717'				
Elevations (DF, RKB, RT, GR, etc.) 5685' GL, 5697' KB	Name of Producing Formation Kutz Fruitland	Top XX/Gas Pay 1424'		Tubing Depth 1599'				
Perforations Kutz Fruitland 1424' - 1434' w/21 shots				Depth Casing Shoe 1757'				
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	8-5/8" 24#		241.51'		200 Sacks			
7-7/8"	4-1/2" 10.5#		1,756.81'		400 Sacks			
	2-3/8"		1,599.00'					

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, 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 1,134	Length of Test 3 hours	XXXXXXX/MCF .142	Gravity of Condensate --
Testing Method (pitot, back pr.) Back Pressure	Tubing Pressure (Shut-in) Packer	Casing Pressure (Shut-in) 560 psig	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.

B. E. Yester
(Signature)
District Operations Manager
(Title)
February 17, 1978
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
BY Original Signed by A. R. Kendrick
TITLE SUPERVISOR DIST. #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 multiply completed wells.