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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

RECEIVED

MAR 26 1975

I. Operator
Marbob Energy Corporation **O. C. C.**
 Address **ARTESIA, OFFICE**
Box 304, Artesia, NM
 Reason(s) for filing (Check proper box)
 New Well Change in Transporter of:
 Recompletion Oil Dry Gas
 Change in Ownership Casinghead Gas Condensate

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Delhi State	Well No. 3	Pool Name, including Formation E. Empire Yates SR	Kind of Lease State, Federal or Fee State	Lease No. B4575
Location Unit Letter N ; 330 Feet From The South Line and 2310 Feet From The West Line of Section 28 Township 17S Range 28E , NMPM, Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Navajo Crude Oil Purchasing Co.	Address (Give address to which approved copy of this form is to be sent) Artesia, New Mexico			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> <i>Phillips Petroleum Co.</i>	Address (Give address to which approved copy of this form is to be sent) <i>4200 - 21st Street, Cheesha, Tex.</i>			
If well produces oil or liquids, give location of tanks.	Unit N	Sec. 28	Twp. 17S	Range 28E
			Is gas actually connected? Yes	When 3-9-75

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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 1-20-75	Date Compl. Ready to Prod. 3-6-75	Total Depth 796'	P.B.T.D.					
Elevations (DF, RKB, RT, GR, etc.) 3679GL-3681 DF	Name of Producing Formation E. Empire - Yates SR	Top Oil/Gas Pay 705	Tubing Depth					
Perforations						Depth Casing Shoe 793		
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE 6 1/2"	CASING & TUBING SIZE 4 1/2"		DEPTH SET 793'			SACKS CEMENT 200		

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 3-9-75	Date of Test 3-10-75	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 Hrs.	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test 1	Oil - Bbls. 10	Water - Bbls. ----	Gas - MCF -----

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

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.

Chris Goodson
 (Signature)

Agent

(Title)

3/25/75

(Date)

OIL CONSERVATION COMMISSION

MAR 27 1975

APPROVED _____, 19____

BY _____

TITLE OIL AND GAS INSPECTOR

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