

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

1. OPERATOR	Operator Marbob Energy Corporation ✓	
2. ADDRESS	Address P.O. Drawer 217, Artesia, N.M. 88210	
3. REASON(S) FOR FILING (Check proper box)	Other (Please explain)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of: Oil <input type="checkbox"/> Gas <input type="checkbox"/>	
Recompletion <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>		

RECEIVED BY
MAR 27 1984
O. C. D. ARTESIA, OFFICE

If change of ownership give name
and address of previous owner _____

1. DESCRIPTION OF WELL AND LEASE

Lease Name NG Phillips St.	Well No. 36	Pool Name, including Formation Artesia Qn Grbg SA	Kind of Lease State, Federal or Fee State	Lease No. B-2071
Location Unit Letter <u>P</u> : <u>335</u> Feet From The <u>South</u> Line and <u>330</u> Feet From The <u>East</u> Line of Section <u>27</u> Township <u>17S</u> Range <u>28E</u> , NMPM, <u>Eddy</u> County				

1. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Navajo Refining Co., Pipeline	Address (Give address to which approved copy of this form is to be sent) P.O. Box 159, Artesia, N.M. 88210					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum Co.	Address (Give address to which approved copy of this form is to be sent) 4001 Penbrook, Odessa; Texas 79762					
If well produces oil or liquids, give location of tanks.	Unit G	Sec. 27	Twp. 17S	Rge. 28E	Is gas actually connected? Yes	When 3/16/84

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

2. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Some Res'v. <input type="checkbox"/>	Diff. Res' <input type="checkbox"/>
Date Spudded 2/16/84	Date Comp. Ready to Prod. 3/16/84		Total Depth 3012'		P.B.T.D. 3006'			
Elevations (DF, RAB, RT, CR, etc.) 3666.7' GR	Name of Producing Formation San Andres		Top Oil/Gas Pay 2443'		Tubing Depth 2865'			
Perforations 2443-2845' attached					Depth Casing Shoe 3012'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4"	8 5/8" 24#		500'		250			
7 7/8"	5 1/2" 15.50#		3012'		600, circ. 50			
	2 7/8"		2865'					

3. 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 3/16/84	Date of Test 3/17/84	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hrs.	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test 67	Oil-Bble. 17	Water-Bble. 50	Gas-MCF to pipeline

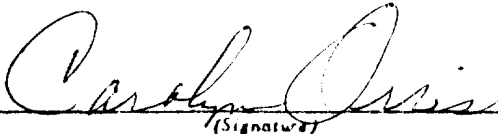
Post FD-24
3-30-84
BK

GAS WELL

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

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.



Production Clerk

(Title)

3/26/84

(Date)

OIL CONSERVATION DIVISION

MAR 27 1984

APPROVED _____, 19____

Original Signed By

Leslie A. Clements

Supervisor District II

TITLE _____

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepen well, this form must be accompanied by a tabulation of the deviate 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 multi-completed wells.

Marbob Energy Corp.
NG Phillips St. #36
Perforations

2443
2458
2465
2470
2491
2494
2504
2507
2514
2526
2531
2536
2544
2550
2554
2562
2567
2571
2655
2671
2677
2688
2695
2702
2708
2720
2726
2732
2735
2751
2756
2776
2786
2795
2802
2807
2820
2829
2841
2845