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LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PROBATION 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

I. Operator **Marks & Garner Production Company**  
 Address **c/o Oil Reports & Gas Services, Inc., Box 763, Hobbs, New Mexico 88240**  
 Reason(s) for filing (check proper box)  
 New Well  Change in Transporter of:  
 Recompletion  Oil  Dry Gas  **Effective 12/1/78**  
 Change in Ownership  Casinghead Gas  Condensate

If change of ownership give name and address of previous owner **Marks, Garner & Rogers, Box 763, Hobbs, NM 88240**

II. DESCRIPTION OF WELL AND LEASE

Lease Name <b>Betenbough</b>	Well No. <b>3</b>	Pool Name, including Formation <b>Bough Permo Perm</b>	Kind of Lease State, Federal or Fee <b>Fee</b>	Lease No.
Location Unit Letter <b>P</b> ; <b>660</b> Feet From The <b>South</b> Line and <b>660</b> Feet From The <b>East</b> Line of Section <b>12</b> Township <b>9 S</b> Range <b>35 E</b> , NMPM, <b>Lea</b> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> <b>Mobil Pipeline Company</b> <small>has changed its name to</small>	Address (Give address to which approved copy of this form is to be sent) <b>Box 900, Dallas, TX 75021</b>
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> <b>Warren Petroleum Corporation</b> <small>or Dry Gas</small>	Address (Give address to which approved copy of this form is to be sent) <b>Box 1589, Tulsa, OK 74102</b>
If well produces oil or liquids, give location of tanks. Unit <b>N</b> Sec. <b>12</b> Twp. <b>9S</b> Rge. <b>35E</b>	Is gas actually commingled? <b>Yes</b> <b>5/8/69</b>

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.
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations				Depth Casing Shoe				
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

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	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (flow, back prod)	Tubing Pressure (5000-10)	Casing Pressure (5000-10)	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.

ORIG. SIGNED BY W. L. SMITH  
 (Signature)  
**Agent**  
 1/17/78  
 (Date)

OIL CONSERVATION COMMISSION

APPROVED JAN 18 1978, 19\_\_

BY Terry Sexton  
 Dist. 3, Supv.

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 this 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 conditions.  
 Separate Form C-104 must be filed for each pool in multiple completed wells.