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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

Operator Flag-Redfern Oil Company		
Address P. O. Box 23, Midland, Texas 79701		
Reason(s) for filing (Check proper box)		Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	UNLESS AN EXCEPTION TO R-4070 IS OBTAINED. 12/1/73
Recompletion <input type="checkbox"/>		
Change in Ownership <input type="checkbox"/>		

If change of ownership give name and address of previous owner

THIS WELL HAS BEEN PLACED IN THE POOL  
DESIGNATED BELOW. IF YOU DO NOT CONCUR  
NOTIFY THIS OFFICE.

II. DESCRIPTION OF WELL AND LEASE

Lease Name Marathon Federal	Well No. 1	Pool Name, including Formation Sawyer, West (San Andres)	Kind of Lease State, Federal or Fee Federal	Lease No. NM-0659
Location Unit Letter <u>F</u> ; <u>2180</u> Feet From The <u>North</u> Line and <u>1980</u> Feet From The <u>West</u> Line of Section <u>23</u> Township <u>9-S</u> Range <u>37-E</u> , NMPM, <u>Lea</u> 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"/> The Permian Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 3119, Midland, Texas 79701	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> None	Address (Give address to which approved copy of this form is to be sent)	
If well produces oil or liquids, give location of tanks.	Unit F	Sec. 23
	Twp. 9-S	Rge. 37-E
	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 <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"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded 8-31-73	Date Compl. Ready to Prod. 9-19-73		Total Depth 5045'		P.B.T.D. 5023'			
Elevations (DF, RKB, RT, CR, etc.) 3990' D.F.	Name of Producing Formation San Andres		Top Oil/Gas Pay 4955'		Tubing Depth 5000'			
Perforations 4955, 57, 58, 59, 61, 66, 67, 72, 73, 74, 97, 98, 99'					Depth Casing Shoe 5023'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE 12-1/4"	CASING & TUBING SIZE 8-5/8"		DEPTH SET 427'		SACKS CEMENT 250 sx Class H, 2% CaCl			
7-7/8"	4-1/2"		5045'		250 sx 50-50 Pozmix			

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 9-19-73	Date of Test 9-29-73	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hrs.	Tubing Pressure -	Casing Pressure -	Choke Size -
Actual Prod. During Test	Oil-Bbls. 40	Water-Bbls. 1	Gas-MCF 123

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.

By: H. L. Loe  
(Signature)

Production Manager

(Title)

October 5, 1973

(Date)

OIL CONSERVATION COMMISSION

APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY [Signature]  
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 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.

September 11, 1973


Deviation surveys taken on Flag-Redfern Oil Company's Marathon-Federal No. 1, Section 23, T-9-S, R-37-E, Lea County, New Mexico.

<u>Depth</u>	<u>Degree</u>
430	1/4
916	1/2
1414	3/4
1925	1
2341	1
2840	1
3331	1
3414	1
3900	1
4044	1 3/4
4256	2
4539	1 1/4
4751	1 1/4
4908	1 1/4
5045	1/4


I hereby certify that I have personal knowledge of the data and facts placed on this sheet, and that such information given above is true and complete.

  
Sherman H. Norton, Jr.  
Sitton and Norton Drilling Company

Before me, the undersigned authority, on this day personally appeared Sherman H. Norton, Jr., known to me to be the person whose name is subscribed hereto, who, after being duly sworn, on oath states that he is the drilling contractor of the well identified in this instrument and that such well was not intentionally deviated from the vertical whatsoever.

  
Sherman H. Norton, Jr.

Sworn and Subscribed to before me, this the 12 day of September, 1973.

  
Doyle Lane  
Notary Public in and for Lubbock County,  
Texas.