STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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DISTRIBUTION			
BANTA FE			
FILE			
V.1.0.1.			
L'AND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR .			
PROGATION OFFICE			

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

Form C-104 Revised 10-01-78 Format 06-01-83 Page 1

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.					
Operator					
MURPHY OPERATING CORPORATION	•				
Address					
P. O. Drawer 2648, Roswell, New Mexico 88	202-2648				
Reason(s) for filing (Check proper box)	Other (Please explain)				
New Well Change in Transporter of:					
Recompletion Oil Dr	Change effective April 1, 1988				
	ndensate				
					
If change of ownership give name Merlin Exploration Inc.	, P. O. Box 3164, Tulsa, Oklahoma 74119				
and address of previous owner	3 1. O. Box 5104, Idiba, Oktanoma 74115				
II DECORPTION OF WELL AND LEACE					
II. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including Fo	ormation Kind of Lease Lease N				
	Andres State K-4058				
STATE CV 1 Chaveroo San A	Andres 1 5000 JR 4030				
	1000 Hoot				
Unit Letter K: 1980 Feet From The South Line	e and 1980 Feet From The West				
	33 Fast NMPM Roosevelt Count				
Line of Section 35 Township 7 South Range	33 East , NMPM, Roosevelt Count				
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	Address (Give address to which approved copy of this form is to be sent)				
Name of Authorized Transporter of Oil or Condensate	{				
Mobil Pipeline Company	P. O. Box 900, Dallas, TX 75221 Address (Give address to which approved copy of this form is to be sent)				
Name of Authorized Transporter of Casinghead Gas a or Dry Gas	I .				
Cities Service Oil & Car NGL Sic	P. O. Box 300, Tulsa, OK 74102				
If well produces oil or liquids, Unit Sec. Twp. Rge.	Is gas actually connected? When				
give location of tanks. K 35 7S 33E	Yes 9/1/66				
If this production is commingled with that from any other lease or pool,	give commingling order number:				
-					
NOTE: Complete Parts IV and V on reverse side if necessary.					
	OIL CONSERVATION DIVISION				
VI. CERTIFICATE OF COMPLIANCE	4444				
I hereby certify that the rules and regulations of the Oil Conservation Division have	APPROVED MAY 6 - 1988 19				
been complied with and that the information given is true and complete to the best of					
my knowledge and belief.	BY ORIGINAL SIGNED BY JERRY SEXTON				
	DISTRICT I SUPERVISOR				
	TITLE				
Melindo K. Olickman	This form is to be filed in compliance with RULE 1104.				
Mulia S. Oswania	If this is a request for allowable for a newly drilled or deepe:				
Melinda K. Hickman (Signature)	well, this form must be accompanied by a tabulation of the deviat tests taken on the well in accordance with RULE 111.				
Production Supervisor	All sections of this form must be filled out completely for all-				
(Title)	able on new and recompleted wells.				
April 28, 1988	Fill out only Sections I. H. III, and VI for changes of own				
(Date)	well name or number, or transporter, or other such change of conditi				
	Separate Forms C-104 must be filled for each pool in multi-				
	completed wells.				

IV. COMPLETION DATA		Oll Well	TGas Well	New Well	Workover	Deepen	Plug Back	Same Restv.	I Day (D.	
Designate Type of Completi	on - (X)	CII Well	i Gas well	1494 4011	Wolforer	i !	i Lind Back	Same Nestv.	DIII. Ker !	
Date Spudded	Date Compl. Ready to Prod.			Total Depth			P.B.T.D.	P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.;	Name of Producing Formation			Top Cil/Gas Pay			Tubing Depth			
Periorations						Depth Casing Shoe				
		TUBING,	CASING, AH	D CEMENTI	NG RECOR	<u> </u>		· · · · · · · · · · · · · · · · · · ·		
HOLE SIZE	CASING & TUBING SIZE			DEPTH SET			S,	SACKS CEMENT		
		•						5 6 6 ·		
V. TEST DATA AND REQUEST OIL WELL	FOR ALLO	WABLE (est must be a ble for this d	ifser recovery epsh or be for	of total volum full 24 hours	ne of load oil	l and must be e	qual to or exc	sed top all	
Date First New Oil Run To Tanks	Date of Test			Producing Method (Flow, pump, gas lift, etc.)						
Length of Test	Tubing Pressure			Casing Pressure			Choko Size			
Actual Prod. During Test	LOII - Bbis.			Water - Bbls.			Gas-MCF			
GAS WELL	<u></u>						·····			
Actual Prod. Test-MCF/D	Length of T	est		Bbls. Cond	ensate/MN/CF		Gravity of	Condensate		
Testing Method (pitci, back pr.)	Tubing Pressure (shut-in)			Casing Pressure (Shwt-in)			Choke Size	Choke Size		