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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  
Superseding Old C-104 and C-11  
Effective 1-1-65

I. Operator  
MURPHY OPERATING CORPORATION  
Address  
200 West First Street-Fourth Floor, Roswell, New Mexico 88201 (Mail: P. O. Box 2648)  
Reason(s) for filing (Check proper box)  
New Well ☐ Change in Transporter of:  
Recompletion ☐ Oil ☐ Dry Gas ☐  
Change in Ownership ☒ Casinghead Gas ☐ Condensate ☐  
Other (Please explain)  
CHANGE OF WELL NAME & NUMBER  
(Well previously: Roosevelt 'AN' State #2)  
Changes effective July 1, 1983

If change of ownership give name and address of previous owner  
Gulf Oil Exploration & Production Co., P.O. Box 1150, Midland, TX 79702

II. DESCRIPTION OF WELL AND LEASE  
Lease Name Section #32 Well No. Pool Name, including Formation Kind of Lease Lease No.  
Todd Lower San Andres Unit 7 Todd Lower San Andres State, Federal or Fee State K-6285  
Location  
Unit Letter L : 1780 Feet From The North Line and 1980 Feet From The East  
Line of Section 32 Township 7S Range 36E, NMPM, Roosevelt County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  
Name of Authorized Transporter of Oil ☒ or Condensate ☐  
Mobil Pipeline Company  
Address (Give address to which approved copy of this form is to be sent)  
P.O. Box 900, Dallas, Texas 75221  
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐  
Cities Service O&G Corp.  
Address (Give address to which approved copy of this form is to be sent)  
Bluitt Plant, Milnesand, New Mexico 88125  
If well produces oil or liquids, give location of tanks. Unit G Sec. 32 Twp. 7S Rge. 36E Is gas actually connected? Yes When 6/4/69

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

V. COMPLETION DATA  
Designate Type of Completion - (X)  
Oil Well Gas Well New Well Workover Deepen Plug Back Same Res'tv. Diff. Res'tv.  
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

VI. 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/MCF Gravity of Condensate  
Testing Method (pilot, 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.  
Signature Mark B. Murphy  
Vice-President, Murphy Operating Corporation  
(Date) 8/1/83  
OIL CONSERVATION COMMISSION  
APPROVED AUG 4 1983  
BY ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR  
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 deviated 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 re-completed 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.