	Form C-104
	Revised 10-01-78
DISTRIBUTION OIL CONSERVA	TION DIVISION Page 1
P. O. BO)	
LAND OFFICE	MEXICO 87501
TAANSPORTER OIL	
OPERATOR AN AN	
AUTHORIZATION TO TRANSP	· ·
Operator	
MARSHALL PIPE & SUPPLY COMPANY	2 75240
13423 FORESTWAY DRIVE, DALLAS, TEXA	
Reason(s) for filing (Check proper box) X New Well Change in Transporter of:	Other (Please explain)
	Gas
	ndensate
change of ownership give name	
nd address of previous owner	
L DESCRIPTION OF WELL AND LEASE	rmation Kind of Lease Lease
	Finite Federal of Fee
WENDELL BEST 1 TULE MONTOYA	
Unit LetterJ ; 1980 Feet From The SOUTH Line	and 2310 Feet From The EAS'T
Line of Section 27 Township 2 SOUTH Range 29	EAST NMPM. ROOSEVELT Cour
II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	GAS
Name of Authorized Transporter of Oli 📋 or Condensate 🔝	Address (Give address to which approved copy of this form is to be sent)
KOCH OIL COMPANY	BOX 1558, BRECKENRIDGE, TEXAS 76024 Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Casinghead Gas or Dry Gas 🕅 CITIGAS	624 SIX FLAGS DR. #128, ARLINGTON, TX 760]
Unit Sec. Twp. Rgs.	Is gas actually connected? When
If well produces oil or liquids, give location of tanks. J 27 T2S R29E	Yes 6-2-88
this production is commingled with that from any other lease or pool, g	ive commingling order number:
NOTE: Complete Parts IV and V on reverse side if necessary.	·
1. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION
hereby certify that the rules and regulations of the Oil Conservation Division have	APPROVED
een complied with and that the information given is true and complete to the best of	OPIGINAL SIGNED BY JERBY SEXTON
y knowledge and belief.	BY DISTRICT & STREET AND
Kutha	TITLE
MMarshall	This form is to be filed in compliance with RULE 1194.
	If this is a request for allowable for a newly drilled or deepe
<u> </u>	
(Signaiwe)	well, this form must be accompanied by a tabulation of the devia tests taken on the well in accordance with RULE 111.
(Signaiure) J. W. MARSHALL, OPERATOR	well, this form must be accompanied by a tabulation of this devia tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for all able on new and recompleted wells.
J. W. MARSHALL, OPERATOR	tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for all

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IV. COMPLETION DATA

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Designate Type of Compl	etion - (X) Oil Well Gas Well X	New Well Workover	Deepen Plug Back Same Res'v. Dill. Re
Date Spudded 4-1-86	Date Compl. Ready to Prod. 5-24-86	Total Depth 7155	P.B.T.D.
Elevations (DF, RKB, RT, GR, etc 4374 KB	Name of Producing Formation Montoya	Top Oll/Gas Pay 7006	Tubing Depth 6998
Perforations 7006 to	7042		Depth Casing Shoe 7153
	TUBING, CASING, A	ND CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2	13-3/8	300	250
11	8-5/8	2185	675
7-7/8	5-1/2	7153	200
5-1/2	2"	6998	
V. TEST DATA AND REQUE OF WELL Date First New Off Run To Tanks	ST FOR ALLOWABLE (Test must be able for this Date of Test	after recovery of total volume depth or be for full 24 hours) Producing Method (Flow, p	of load cil and must be equal to ar exceed top a ump, gas lift, etc.)
	Tubing Pressure	Casing Pressure	Choke Size
Longth of Text			

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GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
1,500 MCF	24	20	60°
Testing stothad (pirot, back pr.)	Tubing Pressure (Shat-15)	Casing Pressure (Shrt-18)	Choke Size
flowing	1400	pkr -0-	14/64