

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 08-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
Marathon Oil Company

Address
P.O. Box 552, Midland, Texas 79702

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	Other (Please explain) Show gas connection date.
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	
<input type="checkbox"/> Change in Ownership	<input checked="" type="checkbox"/> Casinghead Gas	

☐ Dry Gas
☐ Condensate

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name V. E. Roddy	Well No. 1	Pool Name, including Formation North Knowles - Devonian	Kind of Lease State, Federal or Fee	State	Lease No.
Location					
Unit Letter <u>A</u> : <u>750</u> Feet From The <u>North</u> Line and <u>750</u> Feet From The <u>East</u>					
Line of Section <u>23</u> Township <u>16-S</u> Range <u>38-E</u> , NMPM, <u>Lea</u> County					

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> Permian SCURLOCK PERMIAN CORP EFF 9-1-91	Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips 66 Natural Gas Company GPM Gcs Corporation	Address (Give address to which approved copy of this form is to be sent) 2210 Plaza Office Blvd, Bartlesville, OK 74004	
If well produces oil or liquids, give location of tanks.	Unit <u>A</u>	Sec. <u>23</u>
	Twp. <u>16-S</u>	Rge. <u>38-E</u>
Is gas actually connected?		When
<u>Yes</u>		<u>1-30-88</u>

Michael Fitzgibbons

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.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

[Signature]
-J. R. Jenkins
(Signature)
Hobbs Production Superintendent
(Title)
3-23-88
(Date)

OIL CONSERVATION DIVISION

APPROVED MAR 25 1988, 19
BY ORIGINAL SIGNED BY JERRY SEXTON
TITLE DISTRICT I SUPERVISOR

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.

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		X		X					
Date Spudded 3-13-87	Date Compl. Ready to Prod. 5-21-87	Total Depth 13,300'				P.B.T.D. 13,222'			
Elevations (DF, RKB, RT, GR, etc., GR: 3697' KB: 3718')	Name of Producing Formation Devonian		Top Oil/Gas Pay 13,072'			Tubing Depth 12,986'			
Perforations 13,072'-13,100' (4 JSPF - 105 holes)						Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT			
17-1/2"	13-3/8" 48lb./ft.		298'			375 sx. Cl. "C"			
12-1/4"	9-5/8" 36 & 40 lb./ft.		5007'			1800 sx. lite & 250 "H"			
8-3/4"	5-1/2" 17 & 20 lb./ft.		13,280'			1925 sx. 50:50 POZ			
Tubing:	2-7/8"		12,986'						

V. TEST DATA AND REQUEST FOR ALLOWABLE (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 5-21-87	Date of Test 6-09-87	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hours	Tubing Pressure 40 psi	Casing Pressure 0 psi	Choke Size 24/64"
Actual Prod. During Test	Oil - Bbls. 223	Water - Bbls. 0	Gas - MCF 50

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (puot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size