

Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

I. Operator Marbob Energy Corporation		Well API No. 30-025-30195
Address P. O. Drawer 217, Artesia, NM 88210		
Reason(s) for Filing (Check proper box) New Well <input type="checkbox"/> Change in Transporter of: Recompletion <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Change in Operator <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>		

If change of operator give name
and address of previous operator

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

II. DESCRIPTION OF WELL AND LOCATION		Well No. 4	Pool Name, Including Formation Maljamar Grbg SA	Kind of Lease State, Federal or Fee	Lease No. B-2516
Lease Name Petrus D					
Location Unit Letter <u>H</u> : <u>1650</u> Feet From The <u>North</u> Line and <u>990</u> Feet From The <u>East</u> Line Section <u>11</u> Township <u>17S</u> Range <u>33E</u> , NMPM, <u>Lea</u> County					

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS		Address (Give address to which approved copy of this form is to be sent)				
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Navajo Refining Company		P. O. Drawer 159, Artesia, NM 88210				
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Warren Petroleum		Address (Give address to which approved copy of this form is to be sent) P. O. Box 1689, Lovington, NM 88260				
If well produces oil or liquids, give location of tanks.	Unit 0	Sec. 11	Twp. 17S	Rge. 33E	Is gas actually connected? Yes	When? 3/11/88
If this production is commingled with that from any other lease or pool, give commingling order number:					DHC-763	

IV. COMPLETION DATA		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Designate Type of Completion - (X)		XX							XX
Date Spudded 8/20/90	Date Compl. Ready to Prod. 8/26/90	Total Depth 4700'		P.B.T.D. 4673'					
Elevations (DF, RKB, RT, GR, etc.) 4155.5' GR	Name of Producing Formation Grbg SA	Top Oil/Gas Pay 4400'		Tubing Depth 4628'					
Perforations 4400-4596'				Depth Casing Shoe 4700'					
TUBING, CASING AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT					
17 1/4"	8 5/8"	1496'		600 sx H.Lite 200sx C.C.					
7 7/8"	5 1/2"	4700'		765 sx Lit, 450 sx C.C.					
	2 3/8"	4628'							

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 Tank 8/27/90	Date of Test 8/30/90	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hrs.	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test 9	Oil - Bbls. 6	Water - Bbls. 3	Gas - MCF 10

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

VI. OPERATOR 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 above is true and complete to the best of my knowledge and belief.	
Signature Rhonda Nelson	Production Clerk
Printed Name Rhonda Nelson	Title 748-3303
Date 9/14/90	Telephone No.

OIL CONSERVATION DIVISION	
SEP 17 1990	
Date Approved	
By	ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR
Title	

- INSTRUCTIONS: This form is to be filed in compliance with Rule 1104
- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
 - 2) All sections of this form must be filled out for allowable on new and recompleted wells.
 - 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
 - 4) Separate Form C-104 must be filed for each pool in multiply completed wells.