

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

10. COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

Operator MARCUM DRILLING COMPANY	
Address P. O. BOX 5094 MIDLAND, TEXAS 79701	
Reason(s) for filing (Check proper box) New Well <input type="checkbox"/> Change in Transporter of: Recompletion <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Change in Ownership <input checked="" type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	

If change of ownership give name and address of previous owner **WILKINSON-FOSTER BUILDING NE-O-TEX CORPORATION c/o JOHN WOOD, JR. MIDLAND, TEXAS 79701**

II. DESCRIPTION OF WELL AND LEASE

Lease Name HOBBS-STATE	Well No. 1	Pool Name, including Formation HOBBS DRINKARD	Kind of Lease State, Federal or Fee STATE	Lease No. A-14692
Location Unit Letter F 2130 Feet From The NORTH Line and 1650 Feet From The WEST Line of Section 29 Township 18-S Range 38-E , NMFM, LEA County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> ATLANTIC PIPE LINE COMPANY	Address (Give address to which approved copy of this form is to be sent) BOX 1610 MIDLAND, TEXAS 79701	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> PHILLIPS PETROLEUM COMPANY	Address (Give address to which approved copy of this form is to be sent) ROOM B-2 PHILLIPS BUILDING ODESSA, TEXAS	
If well produces oil or liquids, give location of tanks. Unit F Sec. 29 Twp. 18-S Rge. 38-E	Is gas actually connected? YES	When FEBRUARY 15, 1971

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

IV. COMPLETION DATA

Designate Type of Completion -- (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 9-17-70	Date Compl. Ready to Prod. 10-13-70		Total Depth 7050		P.B.T.D. 7032			
Elevations (DF, RKB, RT, GR, etc.) 3654 G. L.	Name of Producing Formation DRINKARD		Top Oil/Gas Pay 6680		Tubing Depth 6655			
Perforations 6680, 6700, 6750, 6778, 6784, 6884, 6890, 6907, 6912, 6940, 6951, 6954, 6978, 6987, 6992.					Depth Casing Shoe 7050			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17 1/2"	12 3/4		356'		400 sks. circ. 50 sks.			
11"	8 5/8		3795'		300 sks.			
7 7/8"	5 1/2		7050'		150 sks.			
	2 3/8		6650'					

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)

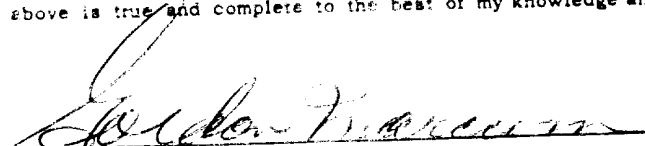
Date First New Oil Run To Tanks 10-14-70	Date of Test 10-17-70	Producing Method (Flow, pump, gas lift, etc.) FLOWING	
Length of Test 24 hours	Tubing Pressure 100 pounds	Casing Pressure PACKER	Choke Size 32/64
Actual Prod. During Test 100 Barrels	Oil-Bbls. 100 Barrels	Water-Bbls. 1/10 of 1%	Gas-MCF

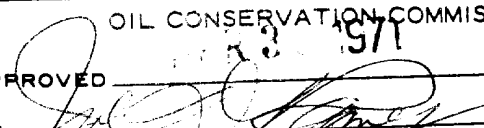
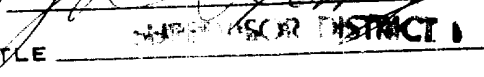
GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, 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)
President
(Title)
3-11-71
(Date)

OIL CONSERVATION COMMISSION
APPROVED  1971
BY 
TITLE **MANAGER DISTRICT 1**

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.

RECEIVED

APR 11 1971

OIL CONSERVATION COMM.
HOBBS, N. M.