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FILE
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 O-104
Replaces Old C-104 and C-110
Effective 1-1-65

Operator
MARCUM DRILLING COMPANY
Address
P. O. BOX 5094 MIDLAND, TEXAS 79701
Reason(s) for filing (Check proper box)
New Well ☐ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☒ Casinghead Gas ☐ Condensate ☐

If change of ownership give name and address of previous owner **NE - O - TEX CORPORATION c/o JOHN WOOD, JR. 610 WILKINSON-FOSTER BLDG. MIDLAND, TEXAS 79701**

DESCRIPTION OF WELL AND LEASE
Lease Name **HOBBS STATE** Well No. **2** Pool Name, including Formation **HOBBS - DRINKARD** Kind of Lease **STATE** Lease No.
Location
Unit Letter **G** **1980** Feet From The **NORTH** Line and **1830** Feet From The **EAST**
Line of Section **29** Township **18 - S** Range **38 - E** NMPM, **LEA** County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil ☒ or Condensate ☐
ATLANTIC PIPELINE 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 ☒ or Dry Gas ☐
PHILLIPS PETROLEUM COMPANY Address (Give address to which approved copy of this form is to be sent)
Rm. B-2, Phillips Bldg. Odessa, Texas 79760
If well produces oil or liquids, give location of tanks. Unit **G** Sec. **29** Twp. **18-S** Rge. **38-E** Is gas actually connected? **No** When

If this production is commingled with that from any other lease or pool, give commingling order number:
COMPLETION DATA
Designate Type of Completion - (X) Oil Well ☒ Gas Well ☐ New Well ☒ Workover ☐ Deepen ☐ Plug Back ☐ Same Res'v. ☐ Diff. Res'v. ☐
Date Spudded **11 - 7 - 70** Date Compl. Ready to Prod. **1 - 1 - 71** Total Depth **7075** P.B.T.D. **7061**
Elevations (DF, RKB, RT, GR, etc.) **3655 G.L.** Name of Producing Formation **Drinkard** Top Oil/Gas Pay **6765** Tubing Depth **6870**
Perforations **6705 - 7030** Depth Casing Shoe **7075**

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 3/4"	9 5/8" 36#	358	200 sks.
8 5/8"	7" 23# & 20#	3850	250 sks.
6 3/4"	4 1/2" 11.60#	7075	425 sks.
	2 3/8" Tubing	6870	

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 **1-1-71** Date of Test **1-5-71** Producing Method (Flow, pump, gas lift, etc.) **Pump 2" X 1-1/4" X 18' Harbison Fisher**
Length of Test **24 hours** Tubing Pressure **Pumping** Casing Pressure **Zero** Choke Size
Actual Prod. During Test **122 Barrels** Oil-Bbls. **122 Barrels** Water-Bbls. **None** Gas-MCF **1696**

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

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.
Sardon M. Mason
(Signature)
President
3-11-71
(Date)

OIL CONSERVATION COMMISSION
APPROVED **ACK 30 1971**
BY **Supervisor District**
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 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.

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HOUSTON, TEXAS