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

State of New Mexico Energy, Minerals and Natural Resources Depak. ent

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

OIL CONSERVATION DIVISION P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator							Well A	API No.			
Marathon Oil Compa	any							30-025-	29616		
Address							•••••				
P. O. Box 552, Mic	lland,	Texas	797	02							
Reason(s) for Filing (Check proper box)					Oth	et (Please expla	iin)				
New Well		Change in	Transpor	ter of:							
Recompletion	Oii	ᆜ	Dry Gar	. 📙							
Change in Operator 🔀	Casinghes	d Gas 🗌	Conden	mte 🔲							
If change of operator give name and address of previous operator TXC) Produc	ction (Corno	ration	415 W	Wall 9	uite 90	0 M id1	and Tev	as 79701	
			JULDU	14010	<u> </u>	Warry Q	VILLE JU	or man	HINAS IUA	13/01	
II. DESCRIPTION OF WELL	AND LEA										
Lotes Nums		Well No.	1		ng Formation	Upper	Ctoto	of Lease Federal or Fe	_	esse No.	
Sprinkle Federal		3	Que	recho	<u>Plains </u>	Bone Spri	ng S	reduced or re	<u> </u>		
Location	_										
Unit LetterE	_ :2	310	Feet Fro	on The $_{}^{ m N}$	orth Li	e and <u>33</u>	<u> 80</u> Fe	et From The	West	Line	
	10.0		_	20 -							
Section 26 Townshi	p 18-S		Range	32-E	, N	MPM,		ea		County	
III. DESIGNATION OF TRAN	CPADTE		II ANI	NATE	DAT GAG						
Name of Authorized Transporter of Oil	DIONIE	or Conden				e address to wh	ich approved	copy of this	form is to be a	ent)	
Koch Oil Company	ت				1	ox 1558,					
Name of Authorized Transporter of Casin	gheed Gas	িয়	or Dry	Ges 🗀		e address to wh					
Phillips 66 Natural G	as		•			enbrook,				-	
If well produces oil or liquids,	Unst _	Sec. 26	Twp. 18	Rge.	Is gas actually connected?			When ?			
give location of tanks.	L L	E 26 18 32			Yes						
If this production is commingled with that	from any oth	er lesse or	pool, giv	commingi	ing order num	ber:					
IV. COMPLETION DATA							·		~		
Designate Type of Completion	~	Oil Well	ļ	as Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
		1 200			Total Doorh	<u> </u>			<u> </u>		
Date Spudded	Date Com	pi. Ready to	Prod		Total Depth			P.B.T.D.			
Fluming (DE DER DE CD etc.)	Nome of D				Top Oil/Gus Pay			D. L. D.	Datin Date		
Elevations (DF, RKB, RT, GR, etc.)	IVALUE OF P	roducing Fo	A DESCRIPTION		,			Tubing Dep	Lucing Depui		
Perforations	1							Depth Casing Shoe			
								1	•		
	TUBING, CASING AND			CEMENTING RECORD							
HOLE SIZE		SING & TL			DEPTH SET			SACKS CEMENT			
								<u>l</u>			
V. TEST DATA AND REQUE									• • • • • • • • • • • • • • • • • • • •		
OIL WELL (Test must be after)			of load o	il and must					for full 24 ho	es.)	
Date First New Oil Run To Tank	Date of Te	£			Producing M	ethod (Flow, pu	опф, даз цят, с	EC.)			
Locath of Test					Casing Press			Choke Size			
Length of Test	Tubing Pressure				Casing 1 rouses						
Actual Prod. During Test	Oil - Bbls.				Water - Bbis.			Gas- MCF			
Actual From Deling Feet	Oil - Bols.										
	1						-	1			
GAS WELL	TT - 4 - 41				Bbls. Conde	AAICE		Courte of	Condenses		
Actual Prod. Test - MCF/D	MCF/D Length of Test				Bols. Conos	MINICI		CHEVRY OF	Gravity of Condensate		
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-iz)				Casing Pressure (Shut-in)			Choke Size			
1 county reserves (peace, sects pr.)	, each pr.)				Casing Flooring (case in)						
YA OPERA MOD COMPANY	 A 1900 000		W T		 		· · · · · ·				
VL OPERATOR CERTIFIC				CE	11 (OIL CON	ISFRV	ATION	DIVISIO	NC	
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above					11						
is true and complete to the best of my knowledge and belief.								ION			
Λ ·	4				Date	Approve	a	_			
CARC A. C	BASWC	حل			11						
Signature	<u> </u>				By_	•	क्रिक्क के किल्क	4 4			
								45.			
Carl A. Bagwell	<u>Engin</u>	<u>eering</u>		<u>nicia</u> n	. []						
Printed Name	Engin		Title		- []		<u> </u>				
	Engin	(915)	Title	626	- []		<u></u>				

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.