

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

CASINGHEAD GAS MUST NOT BE

FLARED AFTER 12-3-92
UNLESS AN EXCEPTION TO R-4070

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator Marathon Oil Company		Well API No. 30-025-30504
Address PO Box 2409 Hobbs, NM 88241		
Reason(s) for Filing (Check proper box) New Well <input type="checkbox"/> Recompletion <input checked="" type="checkbox"/> Change in Operator <input type="checkbox"/>		<input checked="" type="checkbox"/> Other (Please explain) Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> Commingled Delaware and Bone Spring

If change of operator give name
and address of previous operator

II. DESCRIPTION OF WELL AND LEASE

Lease Name State E 744-15	Well No. 1	Pool Name, Including Formation Mescalero Escarpe / Casahuate	Kind of Lease State, Federal or Fee	Lease No. E-744-15
Location Unit Letter <u>I</u> : <u>2086</u> Feet From The <u>South</u> Line and <u>544</u> Feet From The <u>East</u> Line Section <u>15</u> Township <u>18-S</u> Range <u>33-E</u> , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil Koch Oil Company	<input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) PO Box 3609, Midland, TX 79702				
Name of Authorized Transporter of Casinghead Gas Contract negotiations underway	<input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)				
If well produces oil or liquids, give location of tanks.	Unit I	Sec. 15	Twp. 18S	Rge. 33E	Is gas actually connected? No	When ?

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

DHC - 837

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well	Workover	Deepen <input checked="" type="checkbox"/>	Plug Back	Same Res'v	Diff Res'v
Date Spudded 9/29/92	Date Compl. Ready to Prod. 10/3/92		Total Depth 11,496' (wireline)		P.B.T.D. 9537'			
Elevations (DF, RKB, RT, GR, etc.) 3912.6 GL	Name of Producing Formation Delaware/Bone Spring		Top Oil/Gas Pay 5271'/8626'		Tubing Depth 9480'			
Perforations Delaware: 5271-5290', Bone spring: 8626-33' & 9430-76'					Depth Casing Shoe 11,403'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17 1/2"	13 3/8"		450'		410			
12 1/4"	9 5/8"		3,100'		1230			
8 3/4"	5 1/2"		11,403'		2575			
N/A	2 3/8"		9,480'		N/A			

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 10/3/92	Date of Test 10/8/92	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hrs.	Tubing Pressure 15 psi	Casing Pressure 15 psi	Choke Size N/A
Actual Prod. During Test 361 bbls	Oil - Bbls. Del: 21 40 B.S.: 19	Water - Bbls. 208	Gas- MCF 0-BS 117 - Delaware

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

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.

Ricky Dale Gaddis
Signature
R.D. Gaddis
Printed Name
10/9/92
Date
(505) 393-7106
Telephone No.
Production Engineer
Title

OIL CONSERVATION DIVISION

Date Approved NOV 02 '92

By _____

Title ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

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 Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.