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

State of New Mexico rgy, Minerals and Natural Resources Departm

Form C-104
Revised 1-1-89
See Instructions
at Rottons of Previ

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

A					AND NA						
Operator Marathon Oil Company						Well API No. 30-025-31969					
Address P.O. Box 552, Midland, Tex	xas, 797	02									
Reason(s) for Filing (Check proper box)					Oth	er (Please explo	zin)		· · · · ·		
New Well		Change is	Transpor	orter of:			•				
	0 :1	Citation II									
Recompletion	Oil	_	Dry G	_							
Change in Operator	Cazinghea	d Gas	Conde	assis	· · · · · · · · · · · · · · · · · · ·						
If change of operator give name and address of previous operator				<u>[t</u>	IS WELL H	48 DEEN PL	ACED IN TE	E more		 _	
II. DESCRIPTION OF WELL	AND LEA		In at M	NC NC	SIGNATED I	DEFEND S	ON DO TO	OCHERIE Lesse No.			
Lease Name WARN STATE A/C 2		Well No. 21	1		ng Formation NKARD) 🖟 (7937	STAT	Federal or Fee	87485		
SV-R C	.1109			NO	RTH Tim	1993 1193		et From The V	VEST		
B HL C	- :	435	Foot Fi	00 10e -	188/4	and	Fe	st From The _	<u> </u>	Line	
_	10							I EA		_	
Section 6 Township 18S Range 35E , NMPM, LEA County											
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil Condensate Address (Give address to which approved copy of this form is to be sent)									w)		
TX. NM. PIPELINE CO.	}	BOX 60028 SAN ANGELO, TX. 79706-0028									
Name of Authorized Transporter of Casinghead Gas X or Dry Gas GPM						Address (Give address to which approved copy of this form is to be sent) 4001 PENBROOK ODESSA TX. 79762					
If well produces oil or liquids, give location of tanks.	Unit Sec. Tw			Rge.	is gas actually connected? YES		When	ea ? 7-28-93			
If this production is commingled with that f	rom any othe	er lease or	pool, giv		<u> </u>			-			
IV. COMPLETION DATA											
Designate Type of Completion -	· (X)	Oil Well		Gas Well	New Weil	Workover	Deepea	Plug Back	Same Res'v	Diff Res'v	
Date Spudded	Date Comp	L Ready to	Prod.		Total Depth	·		P.B.T.D.		<u> </u>	
6-3-93		7-28			8200				8069		
						Top Oil/Gas Pay					
Elevations (DF, RKB, RT, GR, etc.)	Name of Pr	-			• •			Tubing Depth			
GL:3975' KB:3988' DRINKARD					7623			SN @ 8016			
Perforations							_	Depth Casing	Shoe		
762	23-7693;	7712-	7771;	7800-79	989;				8158'		
	Ť	IBNG	CASI	VG AND	CEMENTIN	IG RECOR	D	·		-	
11015 0135	TUBING, CASING AND CASING & TUBING SIZE				 			SACKO OCHENE			
HOLE SIZE	UAS			NZE	DEPTH SET			SACKS CEMENT			
14 3/4"		11 3,			1,465			750 SX			
11"		8 5/			2,823'			900 SX			
7 7/8"		5 1/2"			8,158			1560 SX			
7 7/0						0,.00			1560 SX		
,,		2 3/				SN @ 8016			1560 SX		
	T FOR A	2 3/	8"						1560 SX		
V. TEST DATA AND REQUES		2 3/ LLOW	8" ABLE	vil and must		SN @ 8016	wable for this	depth or be fo		r.)	
V. TEST DATA AND REQUES OIL WELL (Test must be after re	covery of tol	2 3/ LLOW/ al volume	8" ABLE	oil and must	be equal to or	SN @ 8016 exceed top allo				r.)	
V. TEST DATA AND REQUES OIL WELL (Test must be after re Date First New Oil Run To Tank	covery of tot	23/ LLOW/ al volume	8" ABLE of load o	vil and must	be equal to or	Exceed top allo thod (Flow, pu	mp, gas lift, et			r.)	
V. TEST DATA AND REQUES OIL WELL (Test must be after re Date First New Oil Run To Tank 7-17-93	covery of tot Date of Test	2 3/ LLOW/ al volume t 7-28-9	8" ABLE of load o	vil and must	be equal to or Producing Me	SN @ 8016 exceed top allo thod (Flow, pu		c.)		s.)	
V. TEST DATA AND REQUES OIL WELL (Test must be after re Date First New Oil Run To Tank 7-17-93 Length of Test	covery of tot	2 3/ LLOW/ al volume t 7-28-9	8" ABLE of load o	ril and must	be equal to or	EN @ 8016 exceed top allo thod (Flow, pu	mp, gas lift, et		r full 24 hour	r.)	
V. TEST DATA AND REQUES OIL WELL (Test must be after re Date First New Oil Run To Tank 7-17-93	covery of tot Date of Test	2 3/ LLOW/ al volume t 7-28-9	8" ABLE of load o	vil and must	be equal to or Producing Me Casing Pressu	SN @ 8016 exceed top allo thod (Flow, pu	mp, gas lift, et	c.) Choke Size		s.)	
V. TEST DATA AND REQUES OIL WELL (Test must be after re Date First New Oil Run To Tank 7-17-93 Length of Test	covery of tot Date of Test	2 3/ LLOW/ al volume 7-28-9 sure 300	8" ABLE of load o	vil and must	be equal to or Producing Me	EXCEED SO 16 EXCEED SO ALIO THOO (Flow, put TE PKR	mp, gas lift, et	c.)	r full 24 hour 18/64"	s.)	
V. TEST DATA AND REQUES OIL WELL (Test must be after re Date First New Oil Run To Tank 7-17-93 Length of Test 24 HR	Covery of tot Date of Test Tubing Pres	2 3/ LLOW/ al volume t 7-28-9	8" ABLE of load o	vil and must	be equal to or Producing Me Casing Pressu	EN @ 8016 exceed top allo thod (Flow, pu	mp, gas lift, et	c.) Choke Size	r full 24 hour	r.)	
V. TEST DATA AND REQUES OIL WELL (Test must be after re Date First New Oil Run To Tank 7-17-93 Length of Test 24 HR Actual Prod. During Test	Covery of tot Date of Test Tubing Pres	2 3/ LLOW/ al volume 7-28-9 sure 300	8" ABLE of load o	vil and must	be equal to or Producing Me Casing Pressu	EXCEED SO 16 EXCEED SO ALIO THOO (Flow, put TE PKR	mp, gas lift, et	c.) Choke Size	r full 24 hour 18/64"	s.)	
V. TEST DATA AND REQUES OIL WELL (Test must be after re Date First New Oil Run To Tank 7-17-93 Length of Test 24 HR Actual Prod. During Test GAS WELL	Date of Test Tubing Pres Oil - Bbls.	2 3/ LLOW/ al volume 7-28-9 sure 300	8" ABLE of load o	vil and must	be equal to or Producing Me Casing Pressur Water - Bbls.	EN @ 8016 exceed top allo thod (Flow, put TE PKR 62	mp, gas lift, et	c.) Choke Size Gas- MCF	18/64"	s.)	
V. TEST DATA AND REQUES OIL WELL (Test must be after re Date First New Oil Run To Tank 7-17-93 Length of Test 24 HR Actual Prod. During Test	Covery of tot Date of Test Tubing Pres	2 3/ LLOW/ al volume 7-28-9 sure 300	8" ABLE of load o	vil and must	be equal to or Producing Me Casing Pressu	EN @ 8016 exceed top allo thod (Flow, put TE PKR 62	mp, gas lift, et	c.) Choke Size	18/64"	r.)	
V. TEST DATA AND REQUES OIL WELL (Test must be after re Date First New Oil Run To Tank 7-17-93 Length of Test 24 HR Actual Prod. During Test GAS WELL	Date of Test Tubing Pres Oil - Bbls.	2 3/ LLOW/ al volume 7-28-9 sure 300	8" ABLE of load o	vil and must	be equal to or Producing Me Casing Pressur Water - Bbls.	EN @ 8016 exceed top allo thod (Flow, put TE PKR 62	mp, gas lift, et	c.) Choke Size Gas- MCF	18/64"	r.)	
V. TEST DATA AND REQUES OIL WELL (Test must be after re Date First New Oil Run To Tank 7-17-93 Length of Test 24 HR Actual Prod. During Test GAS WELL	Date of Test Tubing Pres Oil - Bbls.	2 3/ LLOW/ al volume 1 7-28-9 sure 300 375	8" ABLE of load a	vil and must	be equal to or Producing Me Casing Pressur Water - Bbls.	EXCEED TOP ALLO EXCEED TOP ALL	mp, gas lift, et	c.) Choke Size Gas- MCF	18/64"	r.)	
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V. TEST DATA AND REQUES OIL WELL (Test must be after re Date First New Oil Run To Tank 7-17-93 Length of Test 24 HR Actual Prod. During Test GAS WELL Actual Prod. Test - MCF/D Testing Method (pitot, back pr.)	Covery of total Date of Test Tubing Pres Oil - Bbls. Length of T Tubing Pres	2 3/LLOW/ LLOW/ al volume t 7-28-9 sure 300 375 est	8" ABLE of load a		be equal to or Producing Me Casing Pressu Water - Bbls. Bbls. Condens	EXCEED TOP ALLO EXCEED TOP ALL	mp, gas lift, et	Choke Size Gas- MCF Gravity of Co	18/64"	r.)	
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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.