

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator Marathon Oil Company		Well API No. 30-025-32189
Address P.O. Box 552, Midland, Texas, 79702		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name WARN ST. A/C 2	Well No. 24	Pool Name, including Formation VACUUM DRINKARD	Kind of Lease State, Federal or Fee STATE	Lease No. B-1113
Location Unit Letter M : 990 Feet From The SOUTH Line and 400 Feet From The WEST Line Section 6 Township 18-S Range 35-E, NMPM, LEA County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil TX NM PIPELINE CO. <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) BOX 60028 SAN ANGELO, TX. 79706-0028					
Name of Authorized Transporter of Casinghead Gas GPM <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) 4001 PENNBROOCK ODESSA, TX. 79762-4001					
If well produces oil or liquids, give location of tanks.	Unit N	Sec. 6	Twp. 18S	Rge. 35E	Is gas actually connected? YES	When? 10-25-93

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 X	Gas Well	New Well X	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 8-27-93	Date Compl. Ready to Prod. 10-25-93		Total Depth 8170'		P.B.T.D. 8060'			
Elevations (DF, RKB, RT, GR, etc.) GL:3984' KB:3999	Name of Producing Formation DRINKARD		Top Oil/Gas Pay 7606'		Tubing Depth 8048'			
Perforations 7606-8041					Depth Casing Shoe 8170'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
14.75"	11.75", 42#, H-40		1460		850 SX CIRC 125 SX			
11"	8.625", 32# S-80&K-55		2830		1048 SX CIRC 150 SX			
7.875"	5.5", 17#&15.5#, K-55		8170		1860 SX CIRC TOC 2490'			
	2.875", N-80 TBG		8048					

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 10-16-93	Date of Test 10-26-93	Producing Method (Flow, pump, gas lift, etc.) PUMPING	
Length of Test 24 HR	Tubing Pressure N/A	Casing Pressure 150 PSI	Choke Size N/A
Actual Prod. During Test	Oil - Bbls. 193	Water - Bbls. 126	Gas- MCF 1098

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.

Thomas M. Price
Signature
Thomas M. Price Adv. Eng. Tech.
Printed Name
10-27-93 Title
915-682-1626
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved NOV 01 1993
By ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR
Title

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.