

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210
DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator **MARALO, INC.** Well API No. **30-025-32055**

Address **P. O. BOX 832, MIDLAND, TX 79702**

Reason(s) for Filing (Check proper box) ☐ Other (Please explain)

New Well ☒ Change in Transporter of: ☐ Dry Gas ☐
Recompletion ☐ Oil ☐ Casinghead Gas ☐ Condensate ☐
Change in Operator ☐

If change of operator give name and address of previous operator _____

Approval to flare casinghead gas from this well must be obtained from the BUREAU OF LAND MANAGEMENT (BLM)

II. DESCRIPTION OF WELL AND LEASE

Lease Name UNCLE SAM "13" FEDERAL	Well No. 1	Pool Name, Including Formation CORBIN, (WEST (DELAWARE))	Kind of Lease State, <input checked="" type="checkbox"/> Federal or Fee	Lease No. NM-0392867
Location				
Unit Letter H	1650	Feet From The NORTH Line and 990	Feet From The EAST Line	
Section 13	Township 18S	Range 32E	NMPM	LEA County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> SCURLOCK-PERMIAN CORPORATION	Address (Give address to which approved copy of this form is to be sent) P. O. BOX 4648, HOUSTON, TX 77210					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> CONOCO, INC.	Address (Give address to which approved copy of this form is to be sent) 10 DESTA DR., STE 550E, MIDLAND, TX 79705					
If well produces oil or liquids, give location of tanks.	Unit H	Sec. 13	Twp. 18S	Rge. 32E	Is gas actually connected? NO	When? 08-25-93 (APPROX.)

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 XXX	Gas Well	New Well XXX	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 06-29-93	Date Compl. Ready to Prod. 08-01-93		Total Depth 5200'		P.B.T.D. 5142'			
Elevations (DF, RKB, RT, GR, etc.) 3844.0	Name of Producing Formation DELAWARE		Top Oil/Gas Pay 4995'		Tubing Depth 4958'			
Perforations 4995' - 5003'					Depth Casing Shoe			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE 12 1/4"	CASING & TUBING SIZE 8-5/8"		DEPTH SET 458'		SACKS CEMENT 350 SX CLASS "C"			
7-7/8"	5-1/2"		5200'		2175 SX HOWCO LT +			
					150 SX 50/50 POZ MIX			

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 08-03-93	Date of Test 08-07-93	Producing Method (Flow, pump, gas lift, etc.) PUMP	
Length of Test 24 HOURS	Tubing Pressure -	Casing Pressure -	Choke Size -
Actual Prod. During Test 120	Oil - Bbls. 110	Water - Bbls. 10	Gas - MCF 56

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (prior, 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.

Signature *Dorothea Owens*
DOROTHEA OWENS REGULATORY
Printed Name **AUGUST 9, 1993** (915) 684-7441
Date _____ Telephone No. _____

OIL CONSERVATION DIVISION

AUG 11 1993

Date Approved _____

By _____ Orig. Signed by
Paul Kautz
Geologist

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.