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

DISTRICT II P.O. Drawer DD, Astesia, NM \$8210

DISTRICT III 1000 Rio Bazos Rd., Aziec, NM \$7410

State of New Mexico Energy, Minerals and Natural Resources Depar ant

OIL CONSERVATION DIVISION P.O. Box 2088

Santa Fe, New Mexico 87504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION

L.		TO TRA	<u>NS</u>	PORT OIL	AND NA	TURAL G					
Operator						Well API No.					
Marathon Oil Company	30–025–32380										
Address P.O. Box 552, Midland, Texas, 79702											
Resson(s) for Filing (Check proper box)					Out	et (Please expic	sin)				
New Well		Change in		aporter of:							
Recompletion	Oil	Ц	Dry	Ges 📋							
Change in Operator	Casinghen	d Gas	Co								
If change of operator give name and address of previous operator											
IL DESCRIPTION OF WELL		ACT									
			I Name, Including Formation				of Lanes		nan No.		
W. H. Laughlin		5		mont (YSR	-		Sine, Fee	Federal or Fe			
Location			<u> </u>							······	
Unit Letter H	. <u>1980</u> Feet Fi		From The No	North Line and 710			Feet From The East Line				
Section 9 Townshi	p 20-South Ram			ange 37-East , NMPM,				Lea			
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS											
Name of Authorized Transporter of Oil Or Condensate Address (Give address to which approved copy of this form is to be sent)											
Name of Authorized Transporter of Casinghead Gas or Dry Cas X Address (Give address to which approved copy of this form is to be sent)											
Northern Natural Gas					PO Box 1188, Houston,						
·····		Sec.	sc. Twp. Rgs.		ls gas actuali	-	When	When 7			
give location of tanks.			Ļ	<u> </u>		Yes		2-	15-94		
If this production is commingled with that IV. COMPLETION DATA	from any oth	er lesse or	pool,	give commings	nd other anni	ber:					
IV. COMPLETION DATA		Oil Well		Ges Well	New Well	Workover	Despes	Dhue Back	Same Res'v	Diff Retv	
Designate Type of Completion	- (X)	I CH WH		X	X 1.4444 4.441	workower 	i Despos	PRUE DECK			
Date Spudded	Date Compl. Ready to Pro				Total Depth		L	P.B.T.D.		· I	
1-21-94	2-14-94				3750			3658(Fill to 3555)			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation				Top Oil/Gas Pay			Tubing Depth			
GL:3542 KB:3557 Eumont					3472			3545			
Ferforations								Depth Casing Shos			
3472-3579 Selective 3750											
	TUBING, CASING AND										
HOLE SIZE	CASING & TUBING SIZE Conductor				DEPTH SET			SACKS CEMENT Redi Mix			
12 1/4"	8 5/8"			1224			580 Sx. Circ 188 Sx				
7 7/8*	5 1/2"				3750			925 Sx. Circ. 77 Sx			
V. TEST DATA AND REQUES	ST FOR A	LLOW	ABL	E		· · · · · · · · · · · · · · · · · · ·		ł			
OIL WELL (Test must be after r	ecovery of lo	tal volume	of loc	nd oil and must					or full 24 hou	rs.)	
Date First New Oil Run To Tank	Date of Tel	et i			Producing Me	sthod (Flow, pu	mp, gas lift, e	¥C.)			
I much of Test	The line Decement			Casing Pressure			Choke Size				
Leegh of Test	I HOURS PTC	Tubing Pressure			Contrar Liverine						
Actual Prod. During Test	Oil - Bbls.	Oil - Bols.			Water - Bbis.			Gaa- MCF			
-	=				L						
GAS WELL											
Actual Prod. Test - MCF/D	Length of Test				Bbis. Condensate/MMCF			Gravity of Condensate			
219	24 Hr			0							
Testing Method (pitet, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-ia) 50			Choke Size 48/64"			
Back Pressure		20			· · · · · · · · · · · · · · · · · · ·			<u> </u>			
VL OPERATOR CERTIFIC	-						SERV			N	
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information gives above					OIL CONSERVATION DIVISION						
Living and complete to the best of my knowledge and belief.					Date Approved MAR 1 0 1994						
	ll Date	Approve	u	14	111 - 0						
1m asmy	n. 0	,									
Signature						By					
Thomas M. Price	Adv. Eng. Tech				DRIGINAL SIGNED BY JERRY SEXTON						
Printed Name 2-28-94	Title 2-28-94 915-687-8324					Title LISTRICT I SUPERVISOR					
2-20-34 Date				-0324 8 No.						-	
	11	الموجي (1997 - 1997 -									

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.