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LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRODUCTION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-
Effective 1-1-65

I.

Operator Marathon Oil Company	
Address P. O. Box 2409, Hobbs, New Mexico 88240	
Reason(s) for filing (Check proper box)	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 Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name McDonald State A/C 2	Well No. 31	Pool Name, including Formation Drinkard	Kind of Lease State, Federal or Fee State	Lease No. A-2614
Location				
Unit Letter G	1800	Feet From The North	Line and 1650	Feet From The East
Line of Section 13	Township 22-South	Range 36-East	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"/> The Permian Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 3119, Midland, Texas 79701					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Getty Oil Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1137, Eunice, New Mexico 88231					
If well produces oil or liquids, give location of tanks.	Unit D	Sec. 13	Twp. 22-S	Rge. 36-E	Is gas actually connected? Yes	When 7-29-78

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'n.	Diff. Res'n.
Date Spudded 6-30-78	Date Compl. Ready to Prod. 7-22-78	Total Depth 6800'	P.B.T.D. 6742'					
Elevations (DF, RKB, RT, GR, etc.) 3471' GL 3482' KB	Name of Producing Formation Drinkard	Top Oil/Gas Pay 6538'	Tubing Depth 6700'					
Perforations 6538, 41, 43, 49, 51, 55, 67, 69, 77, 79, 83, 85, 6606, 08, 43, 54	2 JSPP					Depth Casing Shoe 6798'		
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
11"	8-5/8"	1320'	425					
7 7/8"	5 1/2"	6798*	1925					
	2 3/8"	6700						
	*D.V. tool @ 3078'							

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 Tanks 7-22-78	Date of Test 8-9-78	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hrs.	Tubing Pressure	Casing Pressure	Choke Size -
Actual Prod. During Test 49	Oil-Bbls. 35	Water-Bbls. 14	Gas-MCF 115

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. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

William R. Luck
(Signature)
Production Engineer
(Title)
August 11, 1978
(Date)

OIL CONSERVATION COMMISSION

APPROVED AUG 14 1978, 19
BY John W. Remy
TITLE Geologist

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowables on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiple