

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

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U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

I. Operator  
Marathon Oil Company  
Address  
P.O. Box 2409 Hobbs, New Mexico 88240  
Reason(s) for filing (Check proper box)  
New Well ☒ Change in Transporter of:  
Recompletion ☐ Oil ☒ Dry Gas ☐  
Change in Ownership ☐ Casinghead Gas ☒ Condensate ☐  
Other (Please explain)

If change of ownership give name  
and address of previous owner

THIS WELL HAS BEEN PLACED IN THE POOL  
DESIGNATED BELOW. IF YOU DO NOT CONCUR  
NOTIFY THIS OFFICE.

II. DESCRIPTION OF WELL AND LEASE

Lease Name C. J. Saunders	Well No. 3	Pool Name, Including Formation Drinkard Hobbs	Kind of Lease State, Federal or Fee Federal	Lease No. LC-04629
Location Unit Letter 'C' 430 Feet From The North Line and 2307 Feet From The West Line of Section 1 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, TX 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, NM 88231					
If well produces oil or liquids, give location of tanks.	Unit D	Sec. 1	Twp. 22-S	Rge. 36-E	Is gas actually connected? Yes	When March 16, 1979

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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Resv.	Diff. Resv.
Date Spudded 12-29-78	Date Compl. Ready to Prod. 1-24-79	Total Depth 6800'	P.B.T.D. 6673'					
Elevations (DF, RKB, RT, GR, etc.) 3514.4' GR 3526.4' KB	Name of Producing Formation Drinkard	Top Oil/Gas Pay 6512'	Tubing Depth 6653'					
Perforations 6533 - 35, 42 - 44, 50 - 54, 61 - 63, 83 - 85, 96 - 98, 6619 - 21, 34-37		Depth Casing Shoe 6788'						
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4"	9 5/8" 32#		1391		700			
8 3/4"	7" 23# & 26#		6788' *		2200			
* D.V. Tool @ 3936'	2 7/8"		6653'					

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 2-20-79	Date of Test 2-26-79	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hours	Tubing Pressure ---	Casing Pressure 75 psi	Choke Size ---
Actual Prod. During Test 455	Oil-Bbls. 201	Water-Bbls. 254	Gas-MCF 361

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

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.

Michael R. Anderson  
(Signature)

Production Engineer  
(Title)

March 19, 1979  
(Date)

OIL CONSERVATION COMMISSION

APPROVED MAR 22 1979, 19  
BY [Signature]  
TITLE SUPERVISOR

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 allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner.