

OIL CONSERVATION DIVISION
P. O. BOX 2070
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

REGISTRATION	
PERMIT	
FILE	
USE	
LAND OFFICE	
TRANSPORTER	☐ OIL ☐ GAS
OPERATOR	
PAYMENT OFFICE	

Marks & Garner Production Company

Address	
c/o Oil Reports & Gas Services, Inc., P. O. Box 762, Hobbs, New Mexico 88241	
Person(s) for filing (Check proper box)	Other (Please explain)
New Well ☐	Change in Transporter of: Effective 11/1/83
Recompletion ☐	Oil ☐ Dry Gas ☐ Formerly State BTTY 6 #25
Change in Ownership ☒	Casinghead Gas ☐ Condensate ☐

If change of ownership give name and address of previous owner: Kaiser - Frances Oil Co., P. O. Box 53558, Tulsa, OK 74153

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
State "23"	25	Wilson Yates-Seven Rivers	State, Federal or Fee State	B-9084
Location				
Unit Letter	F	2270 Feet From The	North Line and	2310 Feet From The
Line of Section	23	Township	21S	Range
			34E	NMPM, Lea County

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 Gas ☒	Address (Give address to which approved copy of this form is to be sent)	
Phillips Petroleum Company	Bartlesville, Oklahoma 74003	
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	Twp.	Rge.
	Yes	Is gas actually connected? When
		9/30/64

If this production is commingled with that from any other lease or pool, give commingling order number: _____

COMPLETION DATA

Designate Type of Completion -- (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res't.	Diff. Res't.
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, CR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing Shoe			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

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

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]
(Signature)
Agent
(Title)
11/4/83
(Date)

OIL CONSERVATION DIVISION

APPROVED NOV 7 1983, 19
ORIGINAL SIGNED BY JERRY SEXTON
BY DISTRICT SUPERVISOR
TITLE _____

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, well name or number, or transporter, or other such change of condition.
Separate Forms C-104 must be filed for each pool in multiple wells.