40 07 054-24 #405:465 · ·								
2137 9 3 17104								
TANCA FE								
FILE								
U.5.G.S.								
LAND OFFICE								
TRANSPORTER	OIL							
	GAS							
OPERATOR								
PRORATION OFFICE								
Operator								
Marathon Oil Comp								

November 27, 1971

(Date)

II.

III.

IV.

FILE U.S.G.S. LAND OFFICE TRANSPORTER OIL GAS	REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS						Su Et	rm C-104 persedes Oli lactiva 1-1-5	d C-104 and C-1.
OPERATOR PROPATION OFFICE Operator	_								
Marathon Oil Comp			<u> </u>						
P. O. Box 2409, H		Mexico	88240		0.1				
New Well Recompletion	Change in Transporter of: Oil Dry Gas				Other (Please explain) Previously McDonald State A/C 1-B No. 6.				1-В
Change in Ownership live name	Casinghe	ad Gas	Conde	nsate					
and address of previous owner					Marin				
DESCRIPTION OF WELL AND		Pool Name,	Including F	umation	· .	Kind of Lea	s e		Lease No.
South Eunice (Seven Rivers, Queen) Unit Location	406	South I Queen)	Eunice 	(Seven	Rivers,	1	al or Fee S	tate	A-2614
Unit Letter H; 19	80 Feet Fro	om The NO	rth Lir	ne and	990	Feet From	The E	ast	
Line of Section 35 To	wnship 22	2-S	Range	36-E	, NMPM		Lea		County
DESIGNATION OF TRANSPOR Name of Authorized Transporter of Oil		AND NAT			Give address	to which appro	oved copy of t	his form is t	o be sent)
Texas-New Mexico Pipe Name of Authorized Transporter of Ca	-	•				•	xas 7970		
Phillips Petroleum Com	_	j or bry d	الليا عمو		_		oved copy of the		•
If well produces oil or liquids, give location of tanks.	Unit Sec	1	Rge. 36E		ually connecte Yes	ed? W	5-12-	 58	
If this production is commingled wi COMPLETION DATA	th that from an	y other leas	e or pool,	give comm	ingling order	number:			
Designate Type of Completic		oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res	v. Diff. Resiv.
Date Spudded	Date Compl. R	Ready to Prod	•	Total Dep	th		P.B.T.D.	<u> </u>	i
Elevations (DF, RKB, RT, GR, etc.)	vations (DF, RKB, RT, GR, etc.; Name of Producing Formation		Top Otl/Gas Pay			Tubing Der	Tubing Depth		
Perforations	<u> </u>						Depth Casi	ng Shoe	
				CEMENT	ING RECOR		. I		
HOLE SIZE	CASING	& TUBING	SIZE		DEPTH SE	ĒT	S	ACKS CEM	ENT
		:							
TEST DATA AND REQUEST FOOIL WELL Date First New Oil Run To Tanks	Date of Test	BLE (Testable	t must be aj for this de	pth or be for	of total volum full 24 hours Method (Flow)		qual to or e.	xceed top allow.
						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
Length of Test	Tubing Pressure		Casing Pressure			Choke Size	Choke Size		
Actual Prod. During Test	Oll-Bbls.			Water - Bbl	8.		Gas-MCF		
GAS WELL									
Actual Prod. Test-MCF/D	Length of Test		Bbls. Condensate/MMCF			Gravity of Condensate			
Testing Method (pitot, back pr.)	Tubing Pressu	re (Shut-in)	Casing Pro	essure (Shut-	in)	Choke Size		
CERTIFICATE OF COMPLIANC	CE				r	ONSERVA	1971		
hereby certify that the rules and r. Commission have been complied w	ith and that t	he informati	on gaves :	APPRO	, <u> </u>		gued Sy		19
bove is true and complete to the				BY		Joe D.	Ramey Supy.		
011/2	^						compliance v	vith RULE	1104.
C.A. Hills	= /2	1		If t	him is a requ	est for allow	vable for a n	owly drille	d or deepened the deviation
(Signa Area Super	•	:		tests ta	ken on the v	vell in accor	rdance with	RULE 111.	•
(Tite				All able on	sections of new and rec	this form mu completed we	at be filled o	out complet	tely for allow-

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.