

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-110
Effective 1-1-65

| | | |
|------------------------|-----|--|
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| SANTA FE | | |
| FILE | | |
| U.S.G.S. | | |
| LAND OFFICE | | |
| TRANSPORTER | OIL | |
| | GAS | |
| OPERATOR | | |
| PRORATION OFFICE | | |

I. Operator
Marathon Oil Company

Address
P. O. Box 220, 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)
Second zone of a dual Blinebry Oil-Drinkard Oil completion.

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

| | | | |
|---|---|--|-----------|
| Lease Name J. L. Muncy | Well No. Pool Name, including Formation 4 Blinebry Oil | Kind of Lease State, Federal or Fee Fee | Lease No. |
| Location Unit Letter H 1980 Feet From The North Line and 660 Feet From The East Line of Section 24 Township 22-S Range 37-E, 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"/> Texas-New Mexico Pipe Line | Address (Give address to which approved copy of this form is to be sent) Box 1860, Midland, Texas |
| Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Warren Petroleum Co. (low press.) El Paso Natural Gas Co. (high press.) | Address (Give address to which approved copy of this form is to be sent) Box 1197, Eunice, New Mexico 321 Pan American Bldg., Tulsa, Okla. |
| If well produces oil or liquids, give location of tanks. Unit Sec. Twp. Rge. P 24 22S 37E | Is gas actually connected? When No |

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 Res'v. | Diff. Res'v. |
| Date Spudded 8-21-68 | Date Compl. Ready to Prod. 4-29-68 | Total Depth 7510' | P.B.T.D. 6971' | | | | | |
| Elevations (DF, RKB, RT, GR, etc.) GR 3325' | Name of Producing Formation Blinebry | Top Oil/Gas Pay 5565' | Tubing Depth 5692' | | | | | |
| Perforations 5565' 5568', 5576', 5594', 5599', 5635', 5640', 5669', 5679' | | | Depth Casing Shoe 7117' | | | | | |
| TUBING, CASING, AND CEMENTING RECORD | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT | | | | | |
| 12-1/4" | 9-5/8" | 1399' | 520 | | | | | |
| 9-7/8" | 7" | 7117' | 1760 | | | | | |
| | 2-3/8" | 5692' | | | | | | |

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 4-29-68 | Date of Test 4-30-68 | Producing Method (Flow, pump, gas lift, etc.) Flow | |
| Length of Test 24 hrs. | Tubing Pressure 925# | Casing Pressure 1150# | Choke Size 15/64" |
| Actual Prod. During Test 92 | Oil - Bbls. 62 | Water - Bbls. 30 | Gas - MCF 490.7 |

GAS WELL

| | | | |
|----------------------------------|---------------------------|---------------------------|-----------------------|
| Actual Prod. Test - MCF/D | Length of Test | Bbls. Condensate/MMCF | Gravity of Condensate |
| Testing Method (pitot, 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.

C. L. Hill Jr.
(Signature)

Area Supt.

(Title)

5-7-68

(Date)

OIL CONSERVATION COMMISSION

APPROVED

BY

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 multiply completed wells.