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LAND OFFICE	
TRANSPORTER	OIL <input type="checkbox"/> GAS <input type="checkbox"/>
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-105
Effective 1-1-65

1.

Operator

Marathon Oil Company

Address

P.O. Box 2409 Hobbs, New Mexico 88240

Reason(s) for filing (Check proper box)

New Well ☐

Recompletion ☒

Change in Ownership ☐

Change in Transporter of:

Oil ☐

Casinghead Gas ☐

Dry Gas ☒

Condensate ☒

Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Lou Worthan	Well No. 14	Pool Name, including Formation Drinkard	Kind of Lease State, Federal or Fee	Lease No. Fee
Location				
Unit Letter A	520	Feet From The North	Line and 330	Feet From The East
Line of Section 11	Township 22S	Range 37E	NMPM, Lea	County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Texas-New Mexico Pipeline Company	P.O. Box 1510 Midland, TX 79701					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Gas Company of New Mexico	1st International Bldg. Suite 1800 Dallas TX					
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 11	Twp. 22S	Rge. 37E	Is gas actually connected? Yes	When May 2, 1979

If this production is commingled with that from any other lease or pool, give commingling order number: PC 545

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input type="checkbox"/>	Gas Well <input checked="" type="checkbox"/>	New Well <input type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Heat. <input type="checkbox"/>	Drill. Res. <input checked="" type="checkbox"/>
Date Spudded 3-12-76	Date Compl. Ready to Prod. 9-26-78	Total Depth 7540'	P.B.T.D. 7515'					
Elevations (DF, RKB, RT, GR, etc.) GL 3350' KB 3361'	Name of Producing Formation Drinkard	Top Oil/Gas Pay 6224'	Tubing Depth 7239'					
Perforations 6224, 26, 41, 44, 46, 66, 68, 71, 74, 76, 78, 92, and 94 (2 JSPE)			Depth Casing Shoe 7516'					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12 - 1 1/4"	9 - 5/8"	1265'	400 sx Dow-Lite; 200 sx Class. "C"					
8 - 3/4"	7"	7516'	Stg. 1-1112' sx 50-50 Poz-lite CI "					
			Stg. 2-1168' sx Dow-Lite w/8# salt/					
			followed by 400 sx CI "C" w/ 6# salt/					

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	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 1844	Length of Test 24 hours	Bbls. Condensate/MACF ---	Gravity of Condensate ---
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in) Csg Completion	Casing Pressure (Shut-in) 950#	Choke Size 24/64

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.

OIL CONSERVATION COMMISSION

APPROVED, MAY 2, 1979, 19

BY Michael L. Anderson
TITLE SUPERVISOR DISTRICT I

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 all wells on new and recompleted wells.

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

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

Production Engineer

May 2, 1979

(Date)