1.	NO. OF COMENTAL ELEVED   DISTRIBUTION   SANTAFE   FILE   U.S.G.S.   LAND OFFICE   TRANSPORTER   OPERATOR   PRORATION OFFICE   Operation	DISTRIBUTION   NEW MEXICO DIL CONSERVATION COMMILIION   Form C-104     NEW MEXICO DIL CONSERVATION COMMILIION   REQUEST FOR ALLOWABLE   Supersedes (IId C-104 and AND     LE   AND   AND   Ethective 1-1-65     AND OFFICE   OIL   AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS     ERATOH   ORISTION OFFICE   OFFICE				
	Marathon Oil Company     Address     P. O. Box 2409, Hobbs, New Mexico 88240     Reason(s) for filing (Check proper bax)     New Well   X     Change in Transporter of:     Recompletion   Oil     Dry Gas     Change in Ownership     Castaghend Gas     If change of ownership give name					
	and address of previous owner					
11.	DESCRIPTION OF WELL AND Lease Name Lou Worthan Location	LEASE Well No. Fool Name, Including F 15 Wantz Abo		nd of Lease ste, Føderal or Føe	Fee	Lease No.
	Unit LetterG; <u>1980</u> Feet From The <u>North</u> Line and <u>1860</u> Feet From The <u>East</u>					
	Line of Section 11 To	wnship 22S Runge	37E , NMPM,	Lea		County
111	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL G	15			
	Name of Authorized Transporter of O Texas-New Mexico Pipe Name of Authorized Transporter of Ca	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1510, Midland, Texas 79701 Address (Give address to which approved copy of this form is to be sent)				
	Unit Sec. Two Page Is als act			0. Box 2300, Midland, Texas 79701		
	If well produces oil or liquids, give location of tanks.	A 11 22S 37E	Yes	Janua	ry 1977	
IV.	If this production is commingled with that from any other lease or pool, give commingling order number:					
	Designate Type of Completi	1	X	Deepen Plug B	1 1	'v. Diff. Ros'v.
	Date Spudded 7–22–76	Date Compl. Ready to Prod, 10-15-76	Total Depth 7675	P.B.T.	7057'	
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Tep Oll/Gas Pay	Tubing	-	
	3345' GR, 3357' KDB     Abo       Perforations     6718, 19, 20, 21, 22, 23, 36, 37, 38       54, 55, 56, 57, 58, 59		6718' , 39, 40, 41, 42, 43, Depth		6792' Casing Sho+ 7675'	
			CEMENTING RECORD			·····
•	HOLE SIZE	CASING & TUBING SIZE	1259'	650	SACKS CEM	ENT
	<u>12 1/4"</u> 8 3/4"	<u> </u>	7675'		Stage - 7	50 sacks
				2nd	Stage -17	700 sacks
l		2 3/8"	6797' *Stage Tool at / 503'			
<b>v</b> .	TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL   (Test must be after recovery of total volume of load oil and must be squal to or axceed top able 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.)					xcesd top allow
	Longth of Test	Tubing Pressure	Casing Pressure	Choke	Size	
	Astual Prod. During Test	Oil·Bbls.	Water-Bble.	Gas-M	CF	
			<u> </u>		<del></del>	
	GAS WELL Actual Frod. Test-MCF/D 1,026	Length of Test 24 hours	Bbis. Condensate/MMCF	Gravity	of Condensate 59.0°	
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shat-in	) Choke		
	Meter Run	1390 psi	Packer		14/64"	
	CERTIFICATE OF COMPLIANCE		APPROVED 1971			
	I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information gives above is true and complete to the best of my knowledge and $2e^{it}$ is		BY Jun W. Hurryan			
	William D. Holmes (Signature)		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 tasks taken on the well in accordance with RUL4 111.			
	Petroleum Engineer (Title)		All sactions of this abla was no sida	a form must be fill pleted wells.	isd out comple	taly for allow-
	January 26, 1977		Fill out only Sections I. H. III, and VI for changes of owner,			

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.

(Date)

or tests

