Supersedes Old C-104 and C-110

HO. OF COPIES RECEIVED DISTRIBUTION NEW MEXICO OIL CONSERVATION COMMI SANTA FE Form C-104 REQUEST FOR ALLOWABLE FILE Effective 1-1-65 AND U.S.G.S. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS LAND OFFICE OIL TRANSPORTER GAS OPERATOR PRORATION OFFICE Marathon Oil Company P. O. Box 2409, Hobbs, New Mexico 88240 Reason(s) for filing (Check proper box) Other (Pirase explain) New Well X Change in Transporter of: Recompletion OIL Dry Gas Change in Ownership Condensate If change of ownership give name and address of previous owner \_\_\_\_ II. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including Formation Kind of Lease Lease No. Walter Lynch 7 Drinkard State, Federal or Fee Fee Location Feet From The North 330 D Unit Letter West Line and Feet From The 1 22-S Line of Section 37**-**E Township Range Lea County III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil X Address (Give address to which approved copy of this form is to be sent) Texas-New Mexico Pipeline Company Box 1510, Midland, Texas 79701 Name of Authorized Transporter of Casinghead Gas 🗓 or Dry Gas Address (Give address to which approved copy of this form is to be sent) Getty Oil Company Box 114, Eunice, New Mexico 88231 Twp. P.ge. Sec. Unit Is gas actually connected? When If well produces oil or liquids, D 1 22-S | 37-E Yes 8-24-77 If this production is commingled with that from any other lease or pool, give commingling order number: PC-534 IV. COMPLETION DATA Oil Well Gas Well New Well Plug Back Same Res'v, Diff. Res'v. Designate Type of Completion - (X) X X Date Spudded Date Compl. Ready to Prod. Total Depth P.B.T.D. 5-19-77 9-18-77 7550 **'** 74661 Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Top Oil/Gas Pay Tubing Depth 3369 RKB Drinkard 6324 **'** 6412' Perforations Depth Casing Shoe 6324-7278' 75491 TUBING, CASING, AND CEMENTING RECORD CASING & TUBING SIZE HOLE SIZE DEPTH SET SACKS CEMENT 12 1/4" 9 5/8" 1255' 600 3/4" 7" 7549' (DV Tool @ 4283')1st stage 725 2nd stage 2450 2 3/8" 7306 (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) V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Date First New Oil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.) 8-24-77 9-21-77 Flowing Choke Size Length of Test Tubing Pressure Casing Pressure 24 hours 750 17 Actual Prod. During Test Oil-Bbla. Water - Bbls. 92 47 45 860 **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 give above is true and complete to the best of my knowledge and help

D TI.	Kovace	.)
Production Eng	(Signature)	ines
Production En	(Title)	
9-22-77		

(Date)

OIL CONSERVATION COMMISSION

APPROVED)	SEP 26 1997	19
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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.

CAL CONSERVATION COMM.