- / ₅					* . *** * . ***			
	TRANSPORTER CEIVED DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE TRANSPORTER GAS		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-13 Effective 1-1-65	
1.	OPERATOR PROBATION OFFICE Cperator							
Marathon Oil Company Address P. O. Box 2409, Hobbs, New Mexico 88240 Reason(s) for filing (Check proper box) New Well X Change in Transporter of: Recompletion Oil Dry Gas Change in Ownership Casinghead Gas Condensate					'lease explain)			
	If change of ownership give name and address of previous owner			· ·				
11.	DESCRIPTION OF WELL AND Legse Name Walter Lynch	Well No. Poo	l Name, Including F Drinkard	formation	Kind of Lease State, Federal o	er Fee Fee	Lease No.	
	Location Unit Letter E; 188	60 Feet From Th	• North Lir	ne and 760	Feet From Th	• West	· · · ·	
	<u></u>	mahip 22-Sout			имем, Lea	· · · · · · · · · · · · · · · · · · ·	County	
11.	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil							
	Name of Authorized Transporter of Casinghead Gas or Dry Gas X			Address (Give address to which approved copy of this form is to be sent) 1st International Bldg., Suite 1800, Dallas, TX				
				Is gas actually connected? When Yes 11-25-78				
	If this production is commingled with that from any other lease or pool, give commingling order number: PC-534 COMPLETION DATA							
			New Well Works	over Deepen 1	Plug Back Same Res	a'v. Diff. Res/v.		
	Date Spudded 9-10-77	Date Compl. Ready		Total Depth 7550		P.B.T.D. 7405		
	GR 3356' KB 3368'			Top Oil/Gas Pay 6296 *		Tubing Depth 6352*		
	Perforations 6307,08,09,10,11,12,18,19,20,27,28,29,3 52,53 (1 JSPF)		2,33,34,46,47,48,50,51,		Depth Casing Shoe 7549 t			
	TU		NG, CASING, AND	CEMENTING RECORD		SACKS CEMENT		
	12 1/4"	9 5/8"	36#	1246'		800		
	8 3/4"	7"	23#	*6499		2000		
	8 3/4" *D.V. Tool @ 4432'	7" 2 1/16"	26# 3.25#	6499-7549' 6352'		2200		
v.	TEST DATA AND REQUEST FOR ALLOWABLE (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		t, etc.) _		
	Length of Test	Tubing Pressure	ubing Pressure			Choke Size		
	Actual Prod. During Test	O11-351s.		Water - Bb.s.		Gas-MCF		
	GAS WELL						-	
	Actual Prod. Test-MCF/D 904	Length of Test 24 hrs		Bbls. Condensate/	MMCF	Gravity of Condensate 52°		
	Testing Method (pitot, back pr.) back pr.	Tubing Pressure (E	ubing Pressure(shnt-in) 800 psi		Sh ut-in) Si	Choke Size 40/64"		
	CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation			OIL CONSERVATION COMMISSION APPROVED DEC 4 1976				
	Commission have been complied with and that the information given shove is true 1.1 complets to the best of my knowledge and belief.			BYSUPERVISOR DISTRICT;				
-	William Reference)			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				
	Production Engineer (Tiele)			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.				
	November 28, 1978			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.				