

DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
PRODUCTION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form O-164
Supersedes Old O-104 and O-105
Effective 1-1-65

Operator: Maralo, Inc.

Address: P. O. Box 832, Midland, Texas 79702

Reason(s) for filing (Check proper box)

New Well	☒	Change in Transporter of:	
Recompletion	☐	Oil	☐
Change in Ownership	☐	Casinghead Gas	☐
		Dry Gas	☐
		Condensate	☐

Oil (if produced) GAS MUST NOT BE PRODUCED
10/1/80
EXEMPTION TO R-407C
IS GRANTED

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease
<u>Maralo "16" State</u>	<u>#10</u>	<u>Sioux Tansill Yates</u>	<u>State</u>
Location			
Unit Letter	<u>0</u>	<u>660</u> Feet From The <u>South</u> Line and <u>1980</u> Feet From The <u>East</u> Line	
Line of Section	<u>16</u>	Township <u>26-S</u> Range <u>36-E</u> , NMPM	Lea

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)
<u>Navajo Crude Oil Purchasing</u>	<u>Box 175, Artesia, New Mexico 88210</u>
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)
<u>El Paso Natural Gas Company</u>	<u>Box 1492, El Paso, Texas 79978</u>
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.
	Is gas actually connected? <u>no</u> When _____

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 ☒ Gas Well ☐ New Well ☒ Workover ☐ Deepen ☐ Plug Back ☐ Some Reval. ☐ Diff. ☐		
Date Spudded <u>6-20-80</u>	Date Compl. Ready to Prod. <u>7-15-80</u>	Total Depth <u>3800'</u>	P.B.T.D. <u>3780'</u>
Pool <u>Sioux Tansill Yates</u>	Name of Producing Formation <u>Seven Rivers</u>	Top Oil/Gas Pay <u>3437'</u>	Tubing Depth <u>3740'</u>
Perforations <u>3613', 3622', 3631', 3540', 3541', 3558', 3560', 3564', 3565', 3571', 3572', 3583', 3584', 3586', 3588', 3594', 3595', 3724', 3727', 3731', 3734', 3737', 3742', 3746', 3753', 3757', 3758'</u>	TUBING, CASING, AND CEMENTING RECORD		
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
<u>12 1/4"</u>	<u>9 5/8"</u>	<u>1465'</u>	<u>700 sx</u>
<u>7 7/8"</u>	<u>5 1/2"</u>	<u>3794'</u>	<u>800 sx</u>

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 <u>7-15-80</u>	Date of Test <u>7-30-80</u>	Producing Method (Flow, pump, gas lift, etc.) <u>Pump</u>	
Length of Test <u>24 hours</u>	Tubing Pressure <u>-----</u>	Casing Pressure <u>-----</u>	Choke Size <u>-----</u>
Actual Prod. During Test	Oil - Bbls. <u>24</u>	Water - Bbls. <u>67</u>	Gas - MCF <u>30.5</u>

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure	Casing Pressure	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.

Joe Davis
(Signature)

Production Clerk
(Title)

8-28-80

OIL CONSERVATION COMMISSION

APPROVED

BY

TITLE

This form is to be filed in compliance with RULE 1103.

If this is a request for allow oil for a newly drilled or deep well, this form must be accompanied by a tabulation of the data tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allow on new and recompleted wells.

Fill out Sections I, II, III, and VI only for changes of con