Submit 5 Copies
Appropriate District Office
DISTRICT 1
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

Well API No.

OIL CONSERVATION DIVISION

P.O. Box 2088

TO TRANSPORT OIL AND NATURAL GAS

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410

Operator

DISTRICT II
P.O. Drawer DD, Anena, NM 88210

Santa Fe, New Mexico 87504-2088 REQUEST FOR ALLOWABLE AND AUTHORIZATION

Maralo, Inc.											
Address											
P.O. Box 832 Midlar	nd, Tex	as 79	702-0	0832			···				
Reason(s) for Filing (Check proper box)		· · · · · · · · · · · · · · · · · · ·	T		l Othe	et (Please expla	iin)				
New Well Recompletion	Oil	Change in	Dry Ga		.,1						
Change in Operator		id Gas 🔯								İ	
f change of operator give name			•••••								
and address of previous operator											
L. DESCRIPTION OF WELL	AND LE										
Lease Name Well No. Pool Name, Including								of Lease			
Maralo Jalmat Yates	Unit	12	Jalm	at Tan	sill Yat	es 7 Riv	ers	receral of ree	μ2-A-1	3-255-36E	
Location	2	30		N	مغيا	22	0	•	Took		
Unit LetterA	. :	30	Feet Fr	om The	orth Lin	e and33	F. F	et From The	Sast	Line	
Section 13 Township	25S		Range	36E	. N	MPM,	Le	а		County	
Section Township	,		Kange		1 1 1 1 1						
III. DESIGNATION OF TRANS	SPORTE	R OF O	LAN	D NATU	RAL GAS						
Name of Authorized Transporter of Oil X or Condensate						Address (Give address to which approved copy of this form is to be sent)					
Shell Pipe Line Corporation					P.O. Box 2648 Houston, Texas 77252						
						Address (Give address to which approved copy of this form is to be sent)					
Sid Richardson Carbon & Gasoline Companil well produces oil or liquids, Unit Sec. Twp.						201 Main Street Fort Worth, Texa Is gas actually connected? When?				102	
give location of tanks.	•	NE/4 13 258						vember 1, 1991			
f this production is commingled with that f					ing order num	ber:					
IV. COMPLETION DATA	<u> </u>	· · · · · · · · · · · · · · · · · · ·									
Designate Time of Completion	α ν	Oil Well		Jas Well	New Well	Workover	Deepen	Plug Back S	ıme Res'v	Diff Res'v	
Designate Type of Completion		al Pandu in			Total Depth	L		BBTB			
Date Spudded Date Compl. Ready to Prod.								P.B.1.D.	P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas Pay			Tubing Depth			
Elevations (DP, ARB, AT, OA, Ele.)					•						
Perforations	L							Depth Casing	Shoe		
TUBING, CASING AND HOLE SIZE CASING & TUBING SIZE					CEMENTING RECORD DEPTH SET			SACKS CEMENT			
HOLE SIZE	CA	SING	BING	DIZE	DEFINSE			SACKS CENIENT			
•						,		<u></u>			
V. TEST DATA AND REQUES	T FOR	ALLOW	ABLE			4. 11		to to all as to do	. 6.11 04 1		
						be equal to or exceed top allowable for this depth or be for full 24 hours.) Producing Method (Flow, pump, gas lift, etc.)					
Date First New Oil Run To Tank	Date of Te	est			Flooring IV	ediod (1 104) p.	2 /φ, 8αο 191,				
Length of Test	Tubing Pr	Tuking Pressure				ure		Choke Size			
Leagur or rea	Tubing Pressure							·			
Actual Prod. During Test Oil - Bbls.					Water - Bols			Gas- MCF			
•	l				<u> L'</u>	·			 	· ·	
GAS WELL											
Actual Prod. Test - MCF/D	Length of	Test		·	Bbls. Conder	nsate/MMCF		Gravity of Co	ndensate		
			Carina Progr	/Chie.in\		Choke Size					
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Cloke Size			
									<u>,</u>		
VI. OPERATOR CERTIFIC				NCE		OIL CON	NSERV	'ATION E	IVISIC	N	
I hereby certify that the rules and regulations of the Oil Conservation											
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.					Deta	Date Approved MAR 0 5 '92					
	-								 		
Bhenda Collman					By_	Orig. S	igned by Kaut	1			
Signature					by -	Ge	ologist				
Brenda Coffman Agent					Title		-				
2-24-92 (915) 684-7441							200	ANII V	MAV	201000	
Date		Tel	ephone !	No.	ruk	KEC	JKU	UNLY	THI	20 1993	

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.