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

Form C-104  
Supersedes Old C-101 and C-110  
Effective 1-1-65

Operator Maralo, Inc.	
Address P. O. Box 832, Midland, Texas 79702	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	Testing allowable for 90 days only
Recompletion <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	
Change in Transporter of:	
Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>
Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Maralo Jalmat Yates Unit	Well No. #20	Pool Name, Including Formation Jalmat Yates 7 Rivers Tansill	Kind of Lease State, Federal or Fee Fee
Location Unit Letter D ; 1250 Feet From The North Line and 70 Feet From The West Line of Section 18 , Township 25-S Range 37-E , NMPM, Lea County			

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Shell Pipe Line Corporation	Address (Give address to which approved copy of this form is to be sent) BOX 2648, Houston, Texas 77001					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) BOX 1384, Jal, New Mexico 88252					
If well produces oil or liquids, give location of tanks.	Unit 18	Sec. 25	Twp. 37	Rge. 37	Is gas actually connected? Yes	When 9-28-79

If this production is commingled with that from any other lease or pool, give commingling order number:

V. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded 8-29-79	Date Compl. Ready to Prod. 9-27-79		Total Depth 3500'		P.B.T.D. 3491'			
Pool Jalmat	Name of Producing Formation 7 Rivers Queen		Top Oil/Gas Pay 3196'		Tubing Depth 3147'			
Perforations 3196-3202 3266-3270	3384-3389 3425-3429		3443-3447 3482-3486		Depth Casing Shoe 3500'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4"	8 5/8"		410'		250 sx			
7 7/8"	5 1/2"		3500'		850 sx			

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 No Oil Runs	Date of Test 10-3-79	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hours	Tubing Pressure 140	Casing Pressure 220	Choke Size 1/4"
Actual Prod. During Test 25.32	Oil - Bbls. 19.71	Water - Bbls. 5.61	Gas - MCF 320

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, 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.

Production Clerk  
(Title)

October 4, 1979  
(Date)

OIL CONSERVATION COMMISSION

APPROVED OCT 9 1979, 19

BY Orig. Signed By  
Jerry Sexton  
TITLE Dist. L. Supv.

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 Sections I, II, III, and VI only for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiple.