40. 0) COPIDS NEC	IVED	1	
DISTRIBUTIO			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
INANSPORTER	GAS		
OPERATOR			
PROBATION OF			

## NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

Form C-104 Supersedes Old C-104 and C-11

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

-	FILE				AND			Effective [-]-	S	
	U.S.G.S.		AUTHORIZAT	ION TO TRAN	ISPORT (	DIL AND NA	TURAL GA	S		
	LAND OFFICE									
	TRANSPORTER GAS	+	,				•			
1.	OPERATOR PROPATION OFFICE							•		
	Operator  Mobil Producing TX	. & N	.M. Inc.							
	Address									
	Nine Greenway Plaza, Suite 2700, Houston, Texas 77046  Reason(s) for filing (Check proper box)  Other (Please explain)									
	New Well		densate gather							
	Recompletion	Oil Casinghead Gas		The Permian Corp., effective November 1, 1984.						
	Change in Ownership		000							
	If change of ownership give and address of previous own		·							
n.	DESCRIPTION OF WELL	AND	LEASE	ame, including Fo	mation		(ind of Lease	JicARILLA	Lease No.	
	Jicarilla D		1 1	lanco Mesa		5	State, Federal	Federal	-	
	Location									
	Unit Letter M :	99	O Feet From The_	South Line	and	990 \	Feet From Th	west		
	Line of Section 13	To	wnship 26-N	Rænge	3-W	, NMPM,	Rio Ar	riba	County	
m.	DESIGNATION OF TRAN	SPOR	TER OF OIL AND	NATURAL GAS	S Andrews (	ive address to	which approve	d copy of this form is	to be sent)	
	Name of Authorized Transporter The Permian Corpor	m of Oil atini	or Condense	77.				, Texas 77001		
	Name of Authorized Transporte	er of Ca	singhead Gas or	Dry Gas XX	Address (C	ive address to	which approve	d copy of this form is	to be sent)	
	Northwest Pipeline		p		3539 E. 30th St., Farmington, NM 87401					
	If well produces oil or liquide,		1 -	wp. Pge. 26-N:3-W	Is gas act	Yes	l? Wher	,		
	give location of tanks.  If this production is commin.				rive comm		number:		•	
IV.	COMPLETION DATA		Oil Well		New Well	Workover	Deepen	Plug Back   Same Ro	es'v. Diff. Res'v.	
	Designate Type of Co	mpleti	<u> </u>			<u>.</u>		1		
	Date Spudded		Date Compl. Ready to	Prod.	Total Dep	th		P.B.T.D.		
	Elevations (DF, RKB, RT, GR	, etc.j	Name of Producing Fo	ormation	Top Oil/G	as Pay		Tubing Depth		
	Perforations  TUBING, CASING, AND HOLE SIZE CASING & TUBING SIZE							Depth Casing Shoe		
						ING RECORE	<u> </u>	SACKS CEMENT		
						DEPTH SE				
			<del></del>		<del> </del>					
					ļ					
V	. TEST DATA AND REQU	EST I	OR ALLOWABLE	(Test must be a	fter recover	y of total volum	ne of load oil s	and must be equal to o	r exceed top allow-	
٠	Oll. WELL able for this de					pth or be for full 24 hours)  Producing Method (Flow, pump, gas lift, etc.)				
	Length of Test		Tubing Preseure		Casing P	· odejus		Choke Size		
	Ceudin of teat				<u> </u>	Li		Gas - MCF		
	Actual Prod. During Test Oil-Bbls.					NO:	V 05 1984	GGI-MO		
	GAS WELL Actual Prod. Tool-MCF/D		Length of Test		Bbls. Co	denegte/MMCI	radie ()	Gravity of Condense	ite	
	Testing Method (pitot, back ;	<del>w.)</del>	Tubing Pressure (Sh	ut-in )	Cosing P	ressure (Shut-	-in)	Choke Size		
_		D: : .	NCE		1	OIL (	CONSERVA	TION COMMISS	ON	
V	I. CERTIFICATE OF COM	PLIA	NCE		<b>\</b>	-	- NO	)V (5 1984		
	I hereby certify that the rules and regulations of the Oil Conservation					APPROVED				
Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.				Jave,						
						TITLE SUPERVISOR DISTRICT # 3				
	(0 - 1/-				This form is to be filed in compliance with RULE 1104.  If this is a request for allowable for a newly drilled or despended 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.					
	W.B. Ules									
	(Signature) Authorized Agent (Title)									
	10-26-84					Fill out only Sections I. II. III, and VI for changes of dentition				
	(Date)				well name of number, or 104 must be filed for each pool in multiply					