OIL CONSERVATION DIVISION P.O. Box 2088

DISTRICT III
1000 Rio Brizos Rd., Aziec, NM 87410 REQUEST FOR ALLOWABLE AND AUTHORIZATION

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

Santa Fe, New Mexico 87504-2088

OW NO DIESE NELL TENT TO THE	1124	TO TRA	NSPC	ORT OIL	AND NA	TURAL G	AS				
Operator Mobil Producing TX. & N.I							Well	Pl No.			
Mode Producing 12. & N.	M. IIIC., 1711	u ito Ayt		JUII EXPI	. 4 1100.	0.0					
P.O. Box 633 Midland	i, Texas 7	9702				es (Blaces and	ain)				
Reason(s) for Filing (Check proper b	ox)	Change in Transporter of:				Other (Please explain) TO CHANGE OIL/CONDENSATE GATHER TO GARY					
New Well	Oil	ĭmara ≟ lii				WILLIAMS ENERGY COPR. EFFECTIVE 6-1-90					
Recompletion			Conden								
Change in Operator f change of operator give name	Cangra										
ing aggress of bashions obstatos —											
I. DESCRIPTION OF WE	LL AND LE	ASE					1.00		 		
Lease Name		Well No.	Pool No	me, Includi	ng Formation	d Clif		of Lease Federal or Fed	-	ease No.	
Cheney Federa	1	2	Gav	llan l	licture	o Clit	<u> </u>				
Location	0.0	20		_	C	. 9	90 F e	et From The .	W	Line	
Unit LetterM	:	90	Feet Fro	om The	<u> </u>	e and	<u> </u>	et Promitine.	<u> </u>		
Section 17 Toy	vauhip 26-1	N	Range	2-W	, N	MPM, Ri	o Arril	oa		County	
				D. B. LA 1777 11	DAT CAS						
III. DESIGNATION OF THE	RANSPORTE	or Conden			Address (Gi	e address to w	hick approved	copy of this f	orm is to be se	ent)	
Name of Authorized Transporter of (\boxtimes	1	370					
Gary-Williams En Name of Authorized Transporter of C	ergy Cor Casinghead Gas		or Dry	Cas 💟	Address (Gi	e address 10 w	hick approved	copy of this f	orm is to be s	ent)	
Northwest Pipeli		ratio			295 Ch	ipeta J	Way Sal	t Lake	City.	UT 8411	
If well produces oil or liquids,	Unit	Sec.	Twp.	Rge.	is gas actual	y connected?	When		• •		
rive location of tanks.		L	<u> </u>	1	<u> </u>					<u>·</u>	
f this production is commingled with	that from any of	her lease or	pool, giv	e commingl	ing order num	ber:					
V. COMPLETION DATA		104 11/-11		ias Well	New Well	Workover	Deepen	Plue Back	Same Res'v	Diff Res'v	
Designate Type of Comple	tion - (X)	Oil Well		AL WELL		Watere		1 110 200		[
Date Spudded		pl. Ready to	Prod.		Total Depth	<u>. </u>	- *	P.B.T.D.			
					57/0	N				······································	
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation				Top Oil/Gas Pay Tubing Depth							
Perforations								Depth Casis	ng Shoe		
raidado											
		TUBING.	CASI	NG AND	CEMENT	NG RECOF	D C				
HOLE SIZE		SING & TL				DEPTH SET		ļ	SACKS CEN	IENT	
					ļ			 			
					 						
V. TEST DATA AND REQ	HEST FOR	ALLOW	ARLE		l						
V. TEST DATA AND REQ OIL WELL (Test must be a	ofter recovery of t	nali volume	of load	oil and must	be equal to o	r exceed top al	lowable for th	is depth or be	for full 24 hos	ve t.)	
Date First New Oil Run To Tank	Date of T				Producing N	lethod (Flow, p	ump, gas lift.	elc.)			
					<u> </u>			Choke Size	C 67 (88)		
Length of Test	Tubing Pr	TESSUITE STURBER			Casing Pres	nie	同是	EET			
	01. 211				Water - Bbl		12	Gas- MCF	[3]		
Actual Prod. During Test	Oil - Bbla	•					, ,	4 9 2 10	വ		
					_l		0.0			•	
GAS WELL		Tool			RNs Cond	asse/MMCF	<i>,</i> 2	Gravity of	Condentate		
Actual Prod. Test - MCF/D	Prod. Test · MCF/D Length of Test					¥* * * * *	16.				
Testing Method (pitot, back pr.)	Tubing P	ressure (Shu	nt-in)		Casing Pros	aure (Shut-ia)	····································	Choke Size			
VL OPERATOR CERTI	FICATE O	F COMI	PLIAN	NCE		OIL CO	MCEDV	ATION!	DIME	ΩN	
I hereby certify that the rules and	regulations of th	e Oil Coose	avation			OIL OU	NOEHV				
Division have been complied wit	h and that the inf	ormation giv	ven above	¢			•	JUN	1 1 1991	J	
is true and complete to the best of	my knowledge	and Deliei.			∥ Dat	e Approvi	ed				
11 1 1 1 1	l				11 _		~		d.		
Only 20da		SIL EXPLORATION			By.					Χ	
Signature SHIRLEY TOOD	AS ()	SERF FOR MOBIL		u . x ≤ (451 i/iC.			St	JPERVISO	OR DISTR	RICT #3	
Printed Name 6-8-90		(915)6	Title 88-25	85	Title	9					

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

Date

- 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.

Telephone No.

- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Senarate Form C-104 must be filed for each nool in multiply completed wells.