40. 00 COPISS SECTIVED							
DISTRIBUTIO							
SANTA FE							
FILE							
U.S.G.S.							
LAND OFFICE							
TRANSPORTER	OIL						
INAMPONIEN	GAS						
OPERATOR							
PRORATION OF							

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

Form C-104
Supersedes Old C-104 and C-114
Effective 1-1-65

	FILE										AND					(148 1-1-03		
	U.S.G.S.		1			AUTH	IORIZ	ATIC	ר סד אכ	TRAI	NSPORT	OIL AND	NATU	RAL G	AS			
	LAND OFFICE	1	 															
	TRANSPORTER	OIL	┼											•				
		GAS	├ ─	1			•											
_	PROBATION OF	FICE	╂	-												•		
1.	Operator	FICE	ــــــــــــــــــــــــــــــــــــــ	L1														
	Mobil Produc	cina I	Υ.	& N.	М.	Inc.												
	Address						_											
	Nine Greenwa	ay Pla	ıza,	Su	ite	2700	, Hou	usto	n, Te	xas	77046							
	Reason(s) for filing	(Check	proper	bozj	a)						Other (Please explain)							
	New Well				'	Change	in Tran	sport	er of:			To chan	ige o	il/con	densate	gathere	er to	
	Recompletion	Щ				Oil		إسا	•	y Gas	₩.		mıan	corp.	, errect	ive Nov	vember 1,	
	Change in Ownershi	18				Casingl	read Ga	•) Co	ndens	sate [A]	1984.						
	If change of owner	ship giv	e nar	ne														
	and address of pre														·			
	DESCRIPTION O		T A	. •	T 4 6	-												
ш.	DESCRIPTION O	DF WLL	LA	<u>ND L</u>	JE AL	Well No	o. Pool	Name	e, Includi	nç Fo	rmation		Kind	of Lease	JICARIL	LA	Lease No.	
	Jicarilla H	Н			İ	6	Ga	avi1	an Pi	ctui	red Cli	iffs	State	, Federal	or Fee Fed	era l		
•	Location										-				(Ind	ian)		
	Unit Letter	M		990)	Feet F	rom The	. 5	South	Line	and	990	` F•	et From T	he Wes	t	···	
	Contraction		· · —		-	•											_ _	
	Line of Section	2		Tow	nship		26-N		Range	3-	-W	, NMP	М,	Rio A	<u>rriba</u>		County	
111.	DESIGNATION (OF TRA	INSP	ORT	ER	OF OI	L ANI	NA	TURAL	GA:	S Acidona C	Cina addeas	to whi	ch approv	ed come of thi	s form is to	he seat!	
	Name of Authorized					Of	Conden	:Bate	لقا		Address (Give address to which approved copy of this form is to be sent) P. O. Box 1183, Houston, Texas 77001							
	The Permian					-4 6		ne Dev	Gas XX		Address /	Give address	to whi	ch approv	ed copy of thi	s form is to	be sent)	
	Northwest F					dd Gds	<u> </u>	w <i>D</i> .,	GOT WY									
	NOI CHWEST I	TPCTT			Unit		ec.	Twp.	P.ge		3539 E. 30th St., Farmington, NM 87401							
	If well produces of give location of tar		ie,	1	N				N 3-1		Yes	-		i				
					<u> </u>			<u></u>			L						,	
	If this production		ingle	d with	h tha	t from	any oth	ner Je	ase or p	001, [give comm	utuğituğ ora	er num					
IV.	COMPLETION I						Oil We	11	Gas We	11	New Well	Workover	D	epen	Plug Back	Same Res'	v. Diff. Res'v	
	Designate Ty	pe of C	Comp	letio	n —	(X)	•		:		!		. i		!	ı 1	1	
	Date Spudded				Date	Compl	Ready	to Pr	od.		Total Dep	pth			P.B.T.D.			
	Elevations (DF, RA	KB, RT, C	GR, e	tc.j	Nam	e of Pro	of Producing Formation			Top Oil/Gas Pay			Tubing Depth					
											Depth Casing Shoe							
	Perforations												, Dept. Car.	4 200				
							TIBLE	NC C	ASING	AND	CENEN.	TING RECO	RD		L			
		ESIZE			I	CASI					ND CEMENTING RECORD DEPTH SET				SACKS CEMENT			
	HOLI	E 312E			CASING & TUBING SIZE													
					i													
					1										ļ			
											<u>i</u>				L			
V.	TEST DATA AN	D REQ	UES	T FO	R A	LLOR	ABLE	. 17	est musi	be of	ter recove	ry of total vo	lume of	load oil d	ind must be e	qual to or es	xceed top allow	
	OIL WELL								or full 24 hos g Method (Fi		p. eas lif	i. etc.)						
	Date First New Oil	1 Run To	Tank	•	Date	Date of Test						fr						
					Tub	ing Pre	88120				Casing P	1000mo		 	Choke Size			
	Length of Test																	
	Actual Prod. Durin	g Test			011	Bbls.					Water - B	oial Co	10111	# 15.00	Gas-MCF			
	Action Flori				1							1/	10 A c					
	<u></u>												((NV.			
	GAS WELL												- PH	37-3				
	Actual Prod. Test	Len	ength of Test					Bbis. Condensate/MMCFDIST. 3				Gravity of Condensate						
									Tubing Pressure (Shut-is)				Casing Pressure (Shut-in)			Choke Size		
	Testing Method (p	itot, back	Pr.)		Tub	ing Pre	88W0 ()	Shut-	ra î		Casing P	terame (pm.	ut-2 -)		C			
					J						 			650) 44	T.O. CO	MAISSION		
VI.	CERTIFICATE	OF CO	MPL	IAN	CE							OIL	. CON	SERVA	TION COM	AMISSION	٠.	
									_		APPROVED NOV 15/1984							
	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.									tion ven	1	OVED		Dran	なり、	Java /		
										B1								
										TITLE SUPERVISOR DISTRICT # 3								
									11						1164			
	NEW-									и.		- 4	P11	compliance	amin dellie	ed or deepene		
	M.B.Mai								11				*1 * V * * T *	mulation of	d or deepene f the deviatio			
					-		•				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 allow-							
		AL	ıtno	rızı Tu		Agent					A	ll sections	of this	form mu	st be filled (:lis.	ont combin	FATA TOL STICA	
			าก								able on new and recompleted wells. Fill out only Sections I. II. and VI for changes of owner,							
	10-26-84									Fill out only Sections I. II. III, and VI for change of condition.								

(Date)

Fill out only Sections I. II. III, and VI 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 multiply