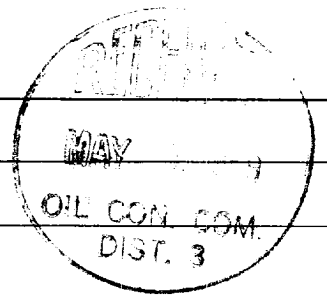


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TRANSPORTER	OIL
	GAS 1
OPERATOR	2
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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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



I. Operator
MOBIL OIL CORPORATION
Address
BOX 1652, CASPER, WYOMING 82601
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Jicarilla "D"	Well No. 12	Pool Name, Including Formation Gavilan - Pictured Cliffs	Kind of Lease State, Federal or Fee Indian	Lease No. 99
Location Unit Letter "0" ; 1640 Feet From The EAST Line and 930' Feet From The SOUTH Line of Section 24 Township 26N Range 3W , NMPM, RIO ARRIBA County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
El Paso Natural Gas Company	Box 990 Farmington, New Mexico	
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	Twp.	Rge.
	Is gas actually connected? No When	

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		X	X					
Date Spudded 11-26-68	Date Compl. Ready to Prod.	Total Depth 4095'	P.B.T.D. 4095'					
Elevations (DF, RKB, RT, GR, etc.) GR 7555' RKB 7568'	Name of Producing Formation PICTURED CLIFFS	Top Gas Pay 3970'	Tubing Depth 4022'					
Perforations 3970'-82', 3996'-4004'. 4012'-20'			Depth Casing Shoe 265'					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT				
9"	7"	265'		100 sacks				
6 1/4"	3 1/2"	4090'		50 sacks				

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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D 4-26-69 2038(CAOF)	Length of Test 3 hours	Bbls. Condensate/MMCF NONE	Gravity of Condensate
Testing Method (pitot, back pr.) PROVER	Tubing Pressure (shut-in) 642#	Casing Pressure (shut-in) 642#	Choke Size 3/4"

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.

R. A. Fair
(Signature) **R. A. FAIR**
PRODUCING SUPERINTENDENT
(Title)
April 29, 1969
(Date)

OIL CONSERVATION COMMISSION
MAY 23 1969
APPROVED
By **Original Signed by Emery C. Arnold**
TITLE **SUPERVISOR DIST. #3**

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 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 completed wells.