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SANTA FE		/		
FILE				
U.S.G.S.				
LAND OFFICE				
TRANSPORTER	OIL			
	GAS	7		
OPERATOR		-		
PROBATION OFFICE				

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104

	SANTA FE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-110		
	FILE		AND	Effective 1-1-65		
	LAND OFFICE	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL G	AS		
	OIL					
	TRANSPORTER GAS					
	OPERATOR					
1.	PRORATION OFFICE					
	Mobil Producing Texas & New Mexico Inc.					
	9 Greenway Plaza, Suite 2700, Houston, TX 77046					
	Reason(s) for filing (Check proper box)					
	New Well	Change in Transporter of:	Other (Please explain) To change Opera	tor name from Mobil Oil		
	Recompletion	Oil Dry Gas				
Change in Ownership Casinghead Gas Condensate (Date: 1-1-1980)		
	If change of ownership give name and address of previous owner					
11	II. DESCRIPTION OF WELL AND LEASE					
Legae Name Well No. Pool Name, including Formation Kind of Lease Jicarilla G Gavilan Pictured Cliffs State, Federal						
						Location M 990
	Unit Letter;;	Feet From The South Line	e andFeet From T	he west		
	Line of Section 35 own	nship 27-N Range	3-W NMPM.	Rio Arriba County		
	2					
m.	DESIGNATION OF TRANSPORT					
	Name of Authorized Transporter of Oil	_	Address (Give address to which approv	eed copy of this form is to be sent)		
	NONE		Address (Give address to which approv	red copy of this form is to be sent?		
	Northwest Pipeline Corpo	-	1	Farmington, NM 87401		
	<u> </u>	Unit Sec. Twp. P.ge.	Is gas actually connected? Whe			
	If well produces oil or liquids, give location of tanks.		YES			
	If this production is commingled with	that from any other lease or pool,	give commingling order number:	2400		
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Resty. Diff. Resty.		
	Designate Type of Completion		1 Agranati Agranati Daaben	Flug adda Same Nessy. Ditt. Nessy.		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth		
				Depth Casing Shoe		
	Perforations			Depth Casing Snoe		
		TUBING, CASING, AND	CEMENTING RECORD			
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
	TEST DATA AND REQUEST FO	PALLOWARIE (Test Ties he co	feet tecourery of total values of load all	and must be equal to or exceed top allow-		
₩.	OIL WELL		pth or be for full 24 hours)			
Date First New Oil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.)						
			Casing Pressure	Choke Size		
	Length of Test	Tubing Pressure	Casing Pivilage			
	Actual Prod. During Test	Oil-Bhis.	Water - Bbis.	Gas - MCF		
	` <u></u>					
	GAS WELL		Bbls. Condensate/MMCF	Gravity of Condensate		
	Actual Prod. Test-MCF/D	Length of Test	Bots, Condensate/MMCF	Gravity of Consensate		
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-is)	Casing Pressure (Shut-in)	Choke Size		
			OU CONSERVA	TION COMMISSION		
VI.	CERTIFICATE OF COMPLIANC	:E .	OIL CONSERVA			
	I hereby certify that the rules and regulations of the Oil Conservation		APPROVED, 19			
	Commission have been compiled w	sion have been compiled with and that the information given a true and complete to the best of my knowledge and belief.		BY Original Signed by FRANK T. CHAVEZ		
	Authorized Agent October 31, 1979 (Date)		The state of the s			
			11			
			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			
l			Separate Forms C-104 must be inted for each poor in municiply			