	DISTRIBUTION	5					
	SANTA FE	7			ATION COMMISSION	Form C-104	
	FILE	#17	REQUEST	AND	LOWABLE	Supersedes Old C-104 an Effective 1-1-65	
	U.S.G.S.		AUTHORIZATION TO TRA		E OII AND NATUDAL	CAS	
	LAND OFFICE		ASTRICKTEATION TO TRA	-INSI OK	OL AND NATURAL	GAS	
	TRANSPORTER OIL GAS	/					
	OPERATOR	2					
I.						•	
	Mobil Producing Texas & New Mexico Inc.						
	Address D1	<i>a :</i>	0.700				
				7046			
	Reason(s) for filing (Check prop	per ook)			Other (Please explain)		
	Recompletion		Change in Transporter of: Oil Dry Go			ator name from Mobil (	
	Change in Ownership		Oil Dry Go Casingheau Gas Conde	=	Corporation.	- D 1 - 1 - 1 - 1 - 1 - 1 - 1 -	
	Citation in Outside in		Conden	nsate	(Effective	e Date: 1-1-1980)	
	If change of ownership give n and address of previous owne						
11.	DESCRIPTION OF WELL	AND L					
	Jicarilla G		Well No. Pool Name, Including F		Kind of Leas		
	Location		7 Blanco Me	sa ver	de State, Federa	HorFee Federal	
	Unit Letter A	900	Feet From The North	e and	990 Feet From	TheEast	
	Line of Section 36	7'ow	nship T-27-N Range	3-W	, NMPM,	Rio Arriba <sub>Cov</sub>	
	DEGLES ARTON OF TRANS						
111.	Name of Authorized Transporter NONE		er OF OIL AND NATURAL GA		(Give address to which appro	oved copy of this form is to be vent)	
	Name of Authorized Transporter of Casinghead Gas or Dry Gas			Address	Address (Give address to which approved copy of this form is to be sent)		
	Northwest Pipeline Corp				3539 E. 30th St, Farmington, NM 87401		
	If well produces oil or liquids,		Unit Sec. Twp. Rge.	Is gas ac		en	
	give location of tanks.		1		YES		
IV.	If this production is commingled with that from any other lease or pool, give commingling order number 2400.  COMPLETION DATA						
			O1. Well Gas Well	New Well	Workover Deepen	Plug Back   Same Resty.   Diff. F	
	Designate Type of Com	ibleiioi	n – (X)	1			
	Date Spudded	_	Date Compl. Ready to Prod.	Total De	pth	P.B.T.D.	
	Elevations (DF, RKB, RT, GR,	etc.,	Name of Producing Formation	Top 0:1/	Gas Pay	Tubing Depth	
	Perforations			1		Depth Casing Shoe	
		<del></del>	TUBING, CASING, AND	CEMEN.	TING RECORD	<u> </u>	
	HOLE SIZE		CASING & TUBING SIZE		DEPTH SET	SACKS CEMENT	
<b>1</b> 7	TEST DATA AND DESCRIP	ST FO	DALLOWARIE (T.	4.00.000	an of soal calcar at 1-2 at	and must be considered as a second	
٧.	TEST DATA AND REQUE OIL WELL	.sı fU	ALLUMABLE (lest must be a able for this de		ry of total volume of load oil or full 24 hours)	and must be equal to or exceed top	
	Date First New Oil Run To Tan	ks	Date of Test		g Method (Flow, pump, gas li	(1, etc.)	
	Length of Test		Tubing Pressure	Casing P	Lessure	Choke Size	
	Actual Prod. During Test		Oil - Bbis.	Water - B)	ple.	Gas-MCF OCT 2 9 19	
						OIL CON. CO	
	GAS WELL					DIST. 3	
	Actual Prod. Test-MCF/D		Length of Test	Bble. Co	ndensate/MMCF	Gravity of Condensate	
	Testing Method (picot, back pr.,	,	Tubing Pressure (Shut-in)	Casing P	resewe (Shut-in)	Choke Size	
VI.	CERTIFICATE OF COMP	LIANC	E		OIL CONSERVA	ATION COMMISSION	
	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.			4855	OVED III	1979 19	
				APPR	BY Original Signed by FRANK I. HA/EZ		
				BY	Original Signed	by trank to march	
				TITLE	· 通过的 · ,以称 · 。 · · · · · · · · · · · · · · · · ·		
				:: ::: <b>:::::::::::::::::::::::::::::::</b>	•		

Authorized Agent (Title) October 31, 1979 (Date)

## RVATION COMMISSION ALLOWABLE

To change Operator name from Mobil Oil

Plug Back | Same Res'v. Diff. Res'v.

Rio Arriba County

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

\_ease No.

	L					
	Top Oil/Gas Pay	Tubing Depth				
	1	Depth Casing Shoe				
	CEMENTING RECORD					
	DEPTH SET	SACKS CEMENT				
		1				
	iter recovery of total volume of load oil oth or be for full 24 hours)	and must be equal to or exceed top allow				
	Producing Method (Flow, pump, gas li)	(i, etc.)				
	Casing Pressure	Choke Size				
	Water - Bble.	Gas-MCF OCT 29 1979				
		OIL CON. COM. DIST. 3				
	Bbls. Condensate/MMCF	Gravity of Condensate				
	Casing Pressure (Shut-in)	Choke Size				
	OIL CONSERVA	TION COMMISSION				
	APPROVED	, 19				
	BY Original Signed	by FRANK I. HA/EZ				
	· · · · · · · · · · · · · · · · · · ·					
TITLE						
		compliance with RULE 1104.				
	If this is a request for allow well, this form must be accompa tests taken on the well in accompa	vable for a newly drilled or deepened nied by a tabulation of the deviation clance with RULE 111.				
		at be filled out completely for allow				
	Fill out only Sections I. II	I, III, and VI for changes of owner ter, or other such change of condition				
	well name or number, or transport	t be filed for each pool in multiply				