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SANTA FE			
FILE			_
U.S.G.S.			
LAND OFFICE		l	
TRANSPORTER	OIL		
	GAS		
OPERATOR		17	
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	SANTA FE		FOR ALLOWABLE	Form C-104 Supersedes Old C-104 and C-110			
	FILE /		AND	Effective 1-1-65			
	U.S.G.S.	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL G	AS			
	LAND OFFICE						
	TRANSPORTER GAS						
	OPERATOR						
I.	PROBATION OFFICE						
Operator Mobil Producing Texas & New Mexico Inc.							
	9 Greenway Plaza, Suite 2700, Houston, TX 77046						
	Reason(s) for filing (Check proper box)		Other (Please explain)				
	New We!1	Change in Transporter of:		tor name from Mobil Oil			
	Recompletion Change in Ownership	Oil Dry Gas Corporation. Casinghead Gas Condensate (Effective Date: 1-1-1980)					
	If change of ownership give name and address of previous owner						
11.	I. DESCRIPTION OF WELL AND LEASE Lease Name Well No. Pool Name, Including Formation Kind of Lease Federal						
	Jicarilla F	6 Blanco Me	sa Verde State, Federal	or F•• (Indian)			
	Location	Nouth	and 990 Feet From T	East			
	Unit Letter A : 990	Feet From The North Line	and 990 Feet From T	he East			
	Line of Section 27 Tow	mship 27N Range 3	−W , NMPM,	Rio Arriba county			
111	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GA	s				
••••	Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which approv	i			
	Plateau Inc.	Inghed Gas Co. or Dry Gas Co.	Box 108 Farmingtor Address (Give address to which approv	NM 8/401 ed copy of this form is to be sent)			
	El Paso Natural Gas, Con		Box 1492 El Paso				
	If well produces oil or liquids,	Unit Sec. Twp. P.ge.	Is gas actually connected? Whe				
	give location of tanks.	A 27 27N 3W	YES				
	If this production is commingled with that from any other lease or pool, give commingling order number: 2300						
IV.	COMPLETION DATA	Oti Well Gas Well	New Well Workover Deepen	Plug Back Same Restv. Diff. Restv.			
	Designate Type of Completio	n – (X)	1	P.B.T.D.			
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.1.D.			
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth			
				Depth Casing Shoe			
	Perforations						
	TUBING, CASING, AND CEMENTING RECORD						
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			
				<u>i </u>			
V.	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a)	fter recovery of rotal volume of load oil (pth or be for fuli 24 hours)	and must be equal to or exceed top allow-			
OII. WELL Date First New Oil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.)							
				Choke Size			
	Length of Test	Tubing Pressure	Casing Pressure	Choir Size			
	Actual Prod. During Test	Oii-Bbls.	Water - Bble.	Gas - Mar			
	Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Contagona			
			(5)	CIL COA			
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Thor. 3			
VI	CERTIFICATE OF COMPLIANCE	CERTIFICATE OF COMPLIANCE OIL CONSERVATION SOMMISSION					
¥1.	CERTIFICATE OF COMPENS	_	007 2 9	1979			
I hereby certify that the rules and regulations of the Oil Conservat		regulations of the Oil Conservation	Original Signed by FRANK T. CHAVEZ				
	Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.						
			TITLE DEPUTY OIL & GAS INSPECTOR, DIST. #3				
			This form is to be filed in compliance with RULE 1104.				
	Becour	Bechine If this is a request for allowable for a newly drilled or d well, this form must be accompanied by a tabulation of the d		vable for a newly drilled or deepened			
	(Signa	U ("" taken on the well in accordance with Note ""					
	Authorized Agent (Title) All sections of this form must be filled out completel able on new and recompleted wells.			118.			
	October 31	•	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.				
	(Date) well name or number, or transporter, or other such change to separate Forms C-104 must be filed for each pool			t be filed for each pool in multiply			
			H 727 +				