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Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

State of New Mexico Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Azzec, NM 87410					LE AND A						
I. TO TRANSPORT OIL AND NATURAL GA Operator MOBIL PRODUCING TEXAS & NEW MEXICO INC.							Well A	Well API No. 30-025-06981 /0208			
Address 12450 GREENSPOINT DRIVE, H	OUSTON	, TX 770	60-19	91				<u> </u>			
Reason(s) for Filing (Check proper box) New Well Recompletion Change in Operator	Oil Casinghes	Change in	Transport Dry Gas Condens			t (Please expla			 		
If change of operator give name and address of previous operator											
L DESCRIPTION OF WELL AND LEASE Lease Name Well No. Pool Name, Include S.E. LONG 7 BLINEBRY GA					St.			Cind of Lease State, Federal or Fee EE		sac No.	
Location Unit Letter	660 Feet From The			m The EA	ST Line	and 1780	Fe	Feet From The SOUTH Line			
Section 11 Township	, 2	28	Range	37E	, NM	(PM,	<u></u>	LEA		County	
III. DESIGNATION OF TRAN	SPORTE	ER OF O	IL ANI	NATU	RAL GAS						
Name of Authorized Transporter of Oil TEXAS NEW MEXICO P/L CO.						Address (Give address to which approved copy of this form is to be sent) P.O. BOX 1510, MIDLAND, TX 79702					
Name of Authorized Transporter of Casing WARREN PETROLEUM COMP		BOX 1	150, MIDL	copy of this form is to be sent) LAND, TX 79701							
If well produces oil or liquids, give location of tanks.	Unit I O	Sec. 11	Twp. Rge. 225 37E		is gas actually connected? YES		j When	Whea ? 5/27/75			
If this production is commingled with that i	from any of	her lease or	pool, give	comming	ing order numb	er:					
IV. COMPLETION DATA Designate Type of Completion	- (X)	Oil Well		ins Well	New Well	Workover	Deepen	Plug Back Sa	ime Res'v	Diff Res'v	
Date Spudded		ipi. Ready to	o Prod.		Total Depth	7 2202	J	P.B.T.D.	6140'		
1/4/94 Elevations (DF, RKB, RT, GR, etc.)	1/12/94 Name of Producing Formation BLINEBRY GAS				7,339' Top Oil/Gas Pay 5395'			Tubing Depth 5343'			
3348' GL Perforations	<u> </u>	BLINEBR	TT GAS		<u> </u>	3333		Depth Casing S	Shoe		
			-5678'	IC AND	CENCENTTI	IC PECOP	n	<u> </u>	NA		
HOLE SIZE	TUBING, CASING AND CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT			
HOLE SIZE		13 3/8"			323'			300			
	9 5/8"			2478'			1325'				
	7"				2358-6392'				579 110		
V. TEST DATA AND REQUES	T FOR	ALLOW	/2" ABLE		L	368-7339		1			
OIL WELL (Test must be after n	ecovery of t	icial volume	of load o	il and must	be equal to or	exceed top all	owable for this	depth or be for	full 24 hou	rs.)	
Date First New Oil Run To Tank	Date of To	est	_			ethod (Flow, p	етр, gas iyi, i				
Length of Test	Tubing Pressure				Casing Pressure			Choke Size			
Actual Prod. During Test	Oil - Bbls.				Water - Bbls.			Gas- MCF			
GAS WELL	<u> </u>										
Actual Prod. Test - MCF/D	Length of Test				Bbis. Condensate/MMCF			Gravity of Condensate 39.8			
799	24 HOURS Tubing Pressure (Shut-in)			Casing Pressure (Shut-in)			Choke Size				
Testing Method (pitot, back pr.) GAS METER	410				NA NA			20/64"			
VI. OPERATOR CERTIFIC	ATE O	F COM	PLIAN	ICE	\parallel		ISFRV	ATION D	IVISIC	N	
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.					Date Approved			MAR 03 1994			
? R	<										
Signature Patricia B. Swanner Reg.Tech/Asst.III					By ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR						
Printed Name February 24, 1994			Title 775-2		Title		DIJIRICI I		٠	A4 .	
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INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance
- with Rule 111. 2) All sections of this form must be filled out for allowable on new and recompleted wells.

Telephone No.

- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

Date