	HO. OF COPIES REC	Elven	_		1				
	DISTRIBUT		->	Ī	-				
	SANTA FE		1	_	1		NEW M		
	FILE		/	_	-				
	U.S.G.S.			_	1				
	LAND OFFICE				AUTHORIZAT				
		OIL			1				
	IRANSPORTER	GAS	7	-	1				
	OPERATOR	1	12	<del>                                     </del>	1				
1.	PRORATION OF	FICE			1				
••	Operator				·		<del></del>		
	Mobil Producing Texas & New Mexico								
	Address								
	9 Greenway	Plaz	a,	Sui	te 2	700,	Houst		
	Reason(s) for filing	(Check p	roper	box)	,				
	New Well				c	Change is	Transpor		
	Recompletion				c	011			
	Change in Ownership	lacksquare			c	Casinghe	ad Gas 🗌		
If change of ownership give name and address of previous owner									
	Lease Name				'		Pool Nan		
	Jicarilla C					3	Tapac		
	Location Unit Letter	Н	:	990		Feet Fro	m The		
	Line of Section	8		Tow	nship	2	6-N		
m.	I. DESIGNATION OF TRANSPORTER OF OIL AND NA Name of Authorized Transporter of Oil or Condensate NONE								
	Name of Authorized Transporter of Casinghead Gas or Di Northwest Pipeline Corporation If well produces oil or liquids, Unit Sec. Tw								
	If this production is commingled with that from any other.								
IV.	Designate Type of Completion — (X)								
	Date Spudded						eady to P		
	Date Spaces								
	Elevations (DF, RKE	RT, GR	, etc	·.j	Name	of Produ	cing Form		
	Perforations								
			T	UBING,					
	HOLE	SIZE					& TUBI		
				1					

October 31, 1979 (Date)

## MEXICO OIL CONSERVATION COMMISSION

Form C-104 0

	FILE	REQUEST	T FOR ALLOWABLE	Supersedes Old C-104 and C-11 Effective 1-1-65				
	U.S.G.S.	AND G.S. AUTHORIZATION TO TRANSPORT OIL AND NATURAL						
	LAND OFFICE	AUTHORIZATION TO TR	CANSPORT OIL AND NATURAL (	GAS				
	I RANSPORTER OIL							
	GAS /							
	OPERATOR 2	4						
1.	PRORATION OFFICE Operator	1						
	Mobil Producing Texas & New Mexico Inc.							
	9 Greenway Plaza, Suite 2700, Houston, TX 77046							
	Reason(s) for filing (Check proper bos	:)	Other (Please explain)					
	New We!1	Change in Transporter of:	To change Opera	tor name from Mobil Oil				
	Recompletion Change in Ownership	Oil Dry G	E   Corporation.	Date: 1-1-1980)				
	If change of ownership give name and address of previous owner							
11.	DESCRIPTION OF WELL AND	LEASE						
	Lease Name Jicarilla C	Well No. Pool Name, Including 3 Tapacito Pict		Lease No.				
	Location	Federal						
	Unit Letter H; 99	O Feet From The East Li	ine and 1650 Feet From	rhe North				
	Line of Section 8 To	wnship 26-N Range 3	3-W , NMPM,	Rio Arriba county				
III.	, DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL G	AS					
	Name of Authorized Transporter of Oi	or Condensate	Address (Give address to which approx	ed copy of this form is to be sent)				
	Name of Authorized Transporter of Ca	- ·· <del>···</del>	Address (Give address to which approx	ed copy of this form is to be sent)				
	Northwest Pipeline Cor	noration	ì	Farmington, NM 87401				
	If well produces oil or liquids,	Unit Sec. Twp. P.ge.	Is gas actually connected? Whe	en O7401				
	give location of tanks.	th that from any other lange or soul	YES					
IV.	COMPLETION DATA	th that from any other lease or pool,						
	Designate Type of Completi	on - (X) Gas Well	New Well Workover Deepen	Plug Back   Same Res'v. Diff. Res'v.				
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.				
	Elevations (DF, RKB, RT, GR, etc.)	evations (DF, RKB, RT, GR, etc.,) Name of Producing Formation		Tubing Depth				
	Perforationa			Depth Casing Shoe				
	Periorations			Depth Coming Snow				
		T	D CEMENTING RECORD	<b>1</b>				
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT				
	·	<del></del>						
V.	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a	after recovery of total volume of load oil ( epth or be for full 24 hours)	and must be equal to or exceed top allow-				
i	OIL WELL Date First New Oil Run To Tanks	Date of Teet	Producing Method (Flow, pump, gas lif	t, etc.)				
	Length of Teet	Tubing Pressure	Casing Pressure	Choke Size				
	Actual Prod. During Test	Oil-Bhis.	Water - Bbis.	Gas-MCF				
	GAS WELL			n de la				
ſ	Actual Prod. Test-MCF/D	Length of Test	Bble. Condensate/MMCF	Gravity of Condensate				
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-ia)	Casing Pressure (Shut-in)	Choke Size				
	resting Method (pitot, back pri)	I mould bressma ( STRE-TR )	Cushing Pressure (Bases 52)	Cilda Gill				
VI.	CERTIFICATE OF COMPLIANCE			TION COMMISSION				
	I hereby certify that the rules and	regulations of the Oil Conservation	APPROVED Original Signed by	FRANK T. CHAVEZ				
-4	Commission have been complied v	with and that the information given best of my knowledge and belief.	BYBY					
			TITLE ASPENDENCE & SA	S INSTERIOR DIST #3				
	0 -	l	This form is to be filed in c	ompliance with RULE 1104.				
	Becky n	ujah	To this is a sequent for allow	able for a newly drilled or deopened nied by a tabulation of the deviation				
-	(Sign	asture ()	tests taken on the well in accord	iance with RULE 111.				
-	Authorized (Ti		All sections of this form mus	it be filled out completely for allow-				

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