Appropriate Unitrice Office DISTRICT J P.O. Box 1980, Hobbs, NM 88240

## OIL CONSERVATION DIVISION P.O. Box 2088

See Instructions at Bestern of Page

O. Drewer DD, Artes	ia, NM 88210		Sa	nta F	e, N	lew Mo	xico 8750	4-2088						
OSTRICT III OCO Rio Brazos Rd., A	REQUEST FOR ALLOWABLE AND AUTHORIZ TO TRANSPORT OIL AND NATURAL GA								ATION S Well API No.					
Operator Mobil Producing	TY B N M	nc. Thru	ı its Aq	Mob	il Expl	& Prod.	U.s. inc	·.	Well A	WELL ALT LIVE				
Address										<del></del>				
P.O. Box 633	Midland, T	exas 79	702				Osh	e (Ploase es	volais.	<del></del>				
Reason(s) for Filing (C New Well Recompletion	Check proper box)	Oil	_	Dry (	Gas		то	CHANGE	E OIL	/CONDE	NSATE GA R. EFFEC	THER TO TIVE 6-1	GARY -90	
Change in Operator	<u> </u>	Casinghea	d Gas	Cond	ien mi						<del></del>			
f change of operator grand address of previous	ive same i operator					<del></del>								
II. DESCRIPTIO		AND LEASE									caulla			
Lease Name			Well No.	4			esa Ver	de Ca			( Lease Federal or Fe		Lesse No. 0 0 0 0 8	- 1
Jicarilla Location	<u>E</u>											E		lia.
Unit Letter	I	_ :16	550	_ Foot	From	The	Lim							_Line
Section	15 Towashi	p 27N		Rang	e :	3W	, Ni	(PM, B	Rio	Arril	oa		Cou	mty
	ON OR TO AN	CBADTE	D UE U	TT . A	ND	NATII	RAL GAS							
II. DESIGNATI	TON OF TRAN	SPURIE	or Conde	D STATE		<u>۱۱۸ ۲                                  </u>	Address (Giv	eddress to	o which	approved	copy of this f	orm is to be	sent)	
		~!. Cor		•	4∟	لم ــــــــــــــــــــــــــــــــــــ	Rep.Pl	.,370	17	St.St	e.5300	Den.	C080	202
Gary-Willi Name of Authorized 1	Transporter of Casin	ghead Gas		or D	ny Ga	a 🔼	Address (Giv							
Northwest  Y well produces oil or		Twp	Twp. Rge.		295 Chipeta Way Is gas actually connected?			y Sal Whea	t Lake 1	City	,UT	8411		
nive location of tanks.		i i	Sec.	Ĺ	i		<u> </u>	<u></u>					<u> </u>	
If this production is co	mmingled with that	from any out	er lease or	pool.	give o	comming	ing order num	xer						
IV. COMPLETI	ON DATA					Well	New Well	Workove	<del>,</del>	Deepen	Plug Back	Same Res'	v Diff I	Res'v
Designate Type	of Completion	- (X)	Oil Wel	1   1	GEI	Mett		HOLDIC		J.,		<u>i</u>	_i_	
Date Spudded	Date Compl. Ready to Prod.					Total Depth				P.B.T.D.				
Elevations (DF, RKB.	Name of Producing Formation					Top Oil/Gas Pay				Tubing Depth				
Perforations											Depth Casing Shoe			
			<u> </u>	<u> </u>	CD 1/	2 ANTO	CEMENT	NG REC	חאט		!			
	TUBING, CASING AND CASING & TUBING SIZE					CLIVILIA 11	·	SACKS CEMENT						
HOLE	SIZE	CA	SING	UBIN	G 312			DEPTH S						
V. TEST DATA	AND REQUE	ST FOR	ALLOW	ABL	Æ ad oil	and muti	be equal to or	exceed top	allow	able for thi	s depth or be	for full 24 I	ioups.)	
OIL WELL	(Test must be after	Date of To	A STATE OF THE STA	,			Producing M	ethod (Flow	w, pur	φ, gas lift, e	stc.)			
	ar First few off Ass				<del> </del>	Caring Pressure (7)								
Length of Test		Tubing Pressure					Ì	122	<u> </u>	(b) (6 3)	Gas- MCF	<u></u> !!		
Actual Prod. During	Oil - Bbis.					JUN1 1 1990								
CACHIELI		1							<b>\11</b>	CON	DIV			·
GAS WELL Actual Prod. Test - N	Leagth of Test					Bbis. Conde	sate/MINA	#F	DIST.	Gravity of	Condensate			
		Tubine P	ressure (Sh	Late in )			Casing Pres	ure (Shut-in	(2		Choke Siz	E		

VL OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above

Testing Method (pitot, back pr.)

Dole

is true and complete to the best of my knowledge and belief. Signature SHIRLEY TOOD Work Curustan a<mark>n a probuchis de dh</mark>a. Bitatur rocada Di**rthae**ana raigean ha. Printed Name (915)688-2585 6-8-90

OIL CONSERVATION DIVISION

Date Approved JUN 11 1990

SUPERVISOR DISTRICT #3

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

Tubing Pressure (Shut-in)

- 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) Senarate Form C-104 must be filed for each nool in multiply completed wells.