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LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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

OCT 20 11 29 AM '65

I. Operator: Socony Mobil Oil Company, Inc.
Address: Box 1800, Hobbs, New Mexico
Reason(s) for filing (Check proper box) Other (Please explain)
New Well ☒ Change in Transporter of: Oil ☐ Dry Gas ☐
Recompletion ☐ Casinghead Gas ☐ Condensate ☐
Change in Ownership ☐
If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE
Lease Name: New Mexico "B" Well No.: 8 Pool Name, Including Formation: Mescalero San Andres Kind of Lease: State, Federal or Fee State
Location: Unit Letter B, 660 Feet From The North Line and 1650 Feet From The East
Line of Section 27, Township 10-S, Range 32-E, NMPM, Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil ☒ or Condensate ☐ Address (Give address to which approved copy of this form is to be sent)
McWood Corporation 2003 Wilco Building, Midland, Texas
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐ Address (Give address to which approved copy of this form is to be sent)
None
If well produces oil or liquids, give location of tanks. Unit A, Sec. 27, Twp. 10-S, Rge. 32-E Is gas actually connected? No When

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA
Designate Type of Completion - (X) Oil Well ☒ Gas Well ☐ New Well ☒ Workover ☐ Deepen ☐ Plug Back ☐ Same Res'v. ☐ Diff. Res'v. ☐
Date Spudded: 10-4-65 Date Compl. Ready to Prod.: 10-14-65 Total Depth: 4300 P.B.T.D.: 4263
Pool: Mescalero Name of Producing Formation: San Andres Top Oil/Gas Pay: 3384 Tubing Depth: 4259
Perforations: 4040, 58, 61, 72, 4084, 4101, 12, 14, 16, 18, 20, 22 & 4125 w/1 SPF (Total 13 holes) Depth Casing Shoe
TUBING, CASING, AND CEMENTING RECORD
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT
12-1/4" 8-5/8" 1564 w/575 sx Incor Neat +
7-7/8" 4-1/2" 4300 100 sx Neat 2% HA-5
w/300 sx Incor Neat

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)
Date First New Oil Run To Tanks: 10-14-65 Date of Test: 10-17-65 Producing Method (Flow, pump, gas lift, etc.): Pump
Length of Test: 24 hours Tubing Pressure: Casing Pressure: Choke Size:
Actual Prod. During Test: 78 Oil - Bbls.: 78 Water - Bbls.: 26 Gas - MCF: 18.

GAS WELL
Actual Prod. Test-MCF/D: Length of Test: Bbls. Condensate/MMCF: Gravity of Condensate:
Testing Method (pitot, back pr.): Tubing Pressure: Casing Pressure: Choke Size:

VI. CERTIFICATE OF COMPLIANCE
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.
L. L. Brennan (Signature)
Acting Group Supervisor (Title)
October 18, 1965 (Date)
OIL CONSERVATION COMMISSION
APPROVED: 19
BY: [Signature]
TITLE:
This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for allowable on new and recompleted wells.
Fill out Sections I, II, III, and VI only 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 completed wells.