|      |  |                                       |  | ,   |  |  |
|------|--|---------------------------------------|--|---|--|--|
|      | NO. OF COPIES RECEIVED   | <b>)</b>                              |  | ,   |  |  |
|      | DISTRIBUTION   | NEW MEYICO OU                         | CONSERVATION COMMISSION                | D   |  |  |
|      | SANTA FE   | ,                                     | FOR ALLOWABLE                          | Form C-104 Supersedes Old C-104 and C-116 |  |  |
|      | FILE /-  | KEGGEST                               | AND                                    | Effective 1-1-65                          |  |  |
|      | U.S.G.S.   | AUTHORIZATION TO TRA                  | ANSPORT OIL AND NATURAL                | GAS                                       |  |  |
|      | LAND OFFICE  | ASTRICKTEATION TO TRA                 | AND ON TOTE AND NATORAL                | oas - c = D                               |  |  |
|      | TRANSPORTER OIL /  | 5                                     | I,                                     | RECEIVED                                  |  |  |
|      | OPERATOR 2   |                                       |  | 1986 2 1986                               |  |  |
| I.   | PRORATION OFFICE   |                                       | ······································ | hand a const                              |  |  |
|      | Operator V   |                                       |  |   |  |  |
|      | Mobil Oil Corporation - Formerly Socony Mobil Oil Company, Inc.  |                                       |  |   |  |  |
|      |  |                                       |  |   |  |  |
|      | P. O. Box 633, Mic   |                                       | Other (Planes and air)                 |   |  |  |
|      | Reason(s) for filing (Check proper box,  | ,                                     | Other (Please explain)                 |   |  |  |
|      | New Well   | Change in Transporter of:  Oil Dry Go | Change Name & W                        |   |  |  |
|      | Recompletion   |                                       | - Unitization 2                        | m. c. J. State                            |  |  |
|      | Change in Ownership  | Casinghead Gas Conde                  | nsate   Old Name: S <del>tat</del>     | <del>ế C. J.</del> #3                     |  |  |
| п.   | DESCRIPTION OF WELL AND Models 11 Corporation West Henshaw Unit Tract  | Well No. Pool Name, Including F       |  | ral or Fee Fee St.                        |  |  |
|      | Unit Letter K  | C Feet From The 5 Lir                 | ne and 1980 Feet From                  | n The                                     |  |  |
|      | ,  | •                                     | •                                      |   |  |  |
|      | Line of Section 2 Tov  | wnship 16 S Range                     | 30 E , NMPM, E                         | ddy County                                |  |  |
|      |  |                                       |  |   |  |  |
| III. | DESIGNATION OF TRANSPORT   |                                       | AS                                     | roved copy of this form is to be sent)    |  |  |
|      | Name of Authorized Transporter of Oil  | <del></del>                           | ,                                      |   |  |  |
|      | Permian Service,   |                                       | Denver City Hwy., Hol                  |   |  |  |
|      | 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   |                                       | 1                                      | Then                                      |  |  |
|      | If well produces oil or liquids,   | Unit Sec. Twp. Rge.                   |  | men                                       |  |  |
|      | give location of tanks.  | M 2 16 30                             | l NC                                   |   |  |  |
|      |  | th that from any other lease or pool, | give commingling order number:         |   |  |  |
| IV.  | COMPLETION DATA  | Oil Well Gas Well                     | New Well Workover Deepen               | Plug Back Same Res'v. Diff. Res'v.        |  |  |
|      | Designate Type of Completion   |                                       | New west workever Beepen               |   |  |  |
|      | Date Spudded   | Date Compl. Ready to Prod.            | Total Depth                            | P.B.T.D.                                  |  |  |
|      |  |                                       |  | ı   |  |  |
|      | Elevations (DF, RKB, RT, GR, etc.)   | Name of Producing Formation .         | Top Oil/Gas Pay                        | Tubing Depth                              |  |  |
|      | Perforations   | <u> </u>                              |  | Depth Casing Shoe                         |  |  |
|      |  |                                       |  |   |  |  |
|      | TUBING, CASING, AND CEMENTING RECORD   |                                       |  |   |  |  |
|      | HOLE SIZE  | CASING & TUBING SIZE                  | DEPTH SET                              | SACKS CEMENT                              |  |  |

V. TEST DATA AND REQUEST FOR ALLOWABLE (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 Date of Test |                 | Producing Method (Flow, pump, gas lift, etc.) |            |
|--|-----------------|---|------------|
| Length of Test                               | Tubing Pressure | Casing Pressure                               | Choke Size |
| Actual Prod. During Test                     | Oil-Bbis.       | Water - Bbls.                                 | Gas - MCF  |

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

## VI. CERTIFICATE OF COMPLIANCE

June 1, 1966

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.

au (Signature) Authorized Agent (Title)

(Date)

OIL CONSERVATION COMMISSION

1966 OR DELL BUY HEREE HOE

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 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 completed wells.