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	LAND OFFICE			
	TRANSPORTER	OIL		
		GAS	UT	
	OPERATOR		1	
1.	PRORATION OFFICE			
	Operator Mobil Producing Texas			
	Address			
	9 Greenway Plaza, Si			
	Reason(s) for filing	Check p	roper	box)

Authorized Agent (Title)

October |

31, 1979

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

Form C-104 Supersedes Old C-104 and C-110

AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS RECEIVED NOV 1 1979 -& New Mexico Inc. O. C. C. te 2700, Houston, TX 77046 Other (Please explain) Change in Transporter of: To change Operator name from Mobil Oil Recompletion Oil Dry Gas Corporation. Change in Ownership Casinghead Gas Condensate (Effective Date: 1-1-1980) If change of ownership give name and address of previous owner ____ II. DESCRIPTION OF WELL AND LEASE Vell No. Pool Name, Including Formation Kind of Lease Lease Name West Henshaw Lease No. State, Federal or Fee Premier Unit, Tract 2 Henshaw Grayburg West Federal .C-060398 Location 3322 Unit Letter_ _Feet From The <u>North</u> Line and <u>1980</u> Feet From The East Township 16**-**S Range 30-Юмрм. Eddy Line of Section County Name of Authorized Transporter of Oil XX or Condensate Address (Give address to which approved copy of this form is to be sent) Navajo Refining Company Box 175 Artesia, NM 88210 Name of Authorized Transporter of Casinghead Gas Pddress (Give address to which approved copy of this form is to be sent)
Box 6666 Odessa, TX Phillips Petroleum Company Continental Oil Company | Unit Box 460 Hobbs 1 Is gas actually connected? <u> New Mexico</u> 88240 Twp. P.ge. Sec. If well produces oil or liquids, give location of tanks. 3 30-E 16-S Yes 1 - 60If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Gas Well Same Res'v. Diff. Res'v. Designate Type of Completion -(X)Date Compl. Ready to Prod. Date Spudded Total Depth P.B.T.D. Name of Producing Formation Top Oil/Gas Pay Tubing Depth Elevations (DF, RKB, RT, GR, etc.) Depth Casing Shoe Perforations TUBING, CASING, AND CEMENTING RECORD CASING & TUBING SIZE DEPTH SET SACKS CEMENT HOLE SIZE 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) OIL WELL 103 Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tanks Date of Teet 1-25-Tubing Pressure Casing Pressure Choke Size Length of Test Gas - MCF Water - Bbls. Actual Prod. During Test Oil-Bbls. **GAS WELL** Gravity of Condensate Actual Prod. Teet-MCF/D Length of Test Bbls. Condensate/MMCF Testing Method (pitot, back pr.) Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Choke Size OIL CONSERVATION COMMISSION VI. CERTIFICATE OF COMPLIANCE JAN 24,1580 APPROVED 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. BY. SUPERVISOR, DISTRICT TITLE . This form is to be filed in compliance with RULE 1104. Belly 1 (ling (Signature)

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, name or number, or transporter, or other such change of condition. Separate Forms C-104 must be filed for each pool in multiply