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| SANTA FE          | 1     |   |  |
| FILE              | 1     |   |  |
| U.S.G.S.          |       |   |  |
| LAND OFFICE       |       |   |  |
| TRANSPORTER       | OIL   |   |  |
| INANSPORTER       | GAS   |   |  |
| OPERATOR          | 1     |   |  |
| PRORATION OF      |       |   |  |
| Operator          |       |   |  |

## NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

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

|      | 1100   |       | -1    |                                |                 | ,   |               |  | AND  |   |              | EII  | ecstae 1-1-62  |                |  |  |
|------|--|-------|-------|--------------------------------|-----------------|---|---------------|--|--|---|--------------|--|----------------|----------------|--|--|
|      | U.S.G.S.   |       |       |                                | AL              | AUTHORIZATION TO TRANSPORT OIL AND NATURAL RAFE EIVED |               |  |  |   |              |  |                |                |  |  |
|      | TRANSPORTER G  |       |       |                                |                 |   |               |  |  |   | NOV 1 1979   |  |                |                |  |  |
| 1.   | PROPATION OFFICE   |       |       |                                |                 |   |               |  |  |   |              |  | 13/3           |                |  |  |
| ••   | Operator  Mobil Product  | Te    | xas   | & Nev                          | . Mexic         | o Ti  |               | · · · · · · · · · · · · · · · · · · ·  |  | ARTESIA,  | C.<br>Office |  |                |                |  |  |
|      | Address  |       |       |                                |                 |   |               |  |  |   |              |  |                |                |  |  |
|      | 9 Greenway Pl<br>Reason(s) for filing (Che   |       |       |                                |                 | 00, Hou   | sto           | n, TX  | 77046  | Other (Please   | e explain l  |  |                | ,              |  |  |
|      | New Well   |       | ·     | ·                              |                 | nge in Tran   | sport         | er of:   | _  | į.  | nge Opera    | itor name  | from Mo        | obil Oil       |  |  |
|      | Recompletion Change in Ownership   |       |       |                                | Oil<br>Cas      | inghead Ga  | s             | Gas<br>lensate   | Corpor   | ation.<br>Effective   | Date:        | 1-1-1986   | 1)             |                |  |  |
|      | If change of ownership   | give  | nem   | ne                             |                 |   |               |  |  | <del></del>   |              | - Date.  | 1 1-1700       | <u> </u>       |  |  |
|      | and address of previous  |       |       |                                |                 | ·   |               | · ·  |  | <del></del>   |              |  |                | <del></del>    |  |  |
| 11.  | DESCRIPTION OF WELL AND LEASE  Lease Name   Well No.   Pool Name, Including Formation   Kind of Lease   Lease No.  |       |       |                                |                 |   |               |  |  |   |              |  |                |                |  |  |
|      | West Henshaw U   | Jnit  | T1    | raci                           | t 2 1           | · WATE  | yburg W       | State, Federal or Fee Federal LC-060898  |  |   |              |  |                |                |  |  |
|      | Unit Letter 7  | 9.    |       | 4620                           | )F•             | et From The   |               | South  | .ine and   | 660   | Feet From    | TheE   | ast            |                |  |  |
|      | Line of Section 3  |       |       | Tow                            | nship           | 16 <b>-</b> S   |               | Range  |  | 30-E <sub>MPM</sub>   | 1.           | Е  | ddy            | County         |  |  |
| 111. | DESIGNATION OF T   |       |       |                                |                 |   |               |  | ias  |   |              |  |                |                |  |  |
|      | Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent)  N/A Water Injection  |       |       |                                |                 |   |               |  |  |   |              |  | be tent)       |                |  |  |
|      | Name of Authorized Tran  | sport | er of | Cas                            | Inghead G       | ias 🗌 o   | r Dry         | Address  | Address (Give address to which approved copy of this form is to be sent) |   |              |  |                |                |  |  |
|      | If well produces oil or lie  | gulda |       |                                | Unit            | Sec.  | Twp.          | Is gas o   | Is gas actually connected? When  |   |              |  |                |                |  |  |
|      | give location of tanks.  |       |       |                                | )<br>1          | 1   |               | ·  |  |   |              |  |                |                |  |  |
| IV.  | f this production is commingled with that from any other lease or pool, give commingling order number:   |       |       |                                |                 |   |               |  |  |   |              |  |                |                |  |  |
|      | Designate Type of Completion — (X)   |       |       |                                |                 |   |               |  |  | 11 Workover   | Deepen       | Plug Back  | Same Resty     | . Diff. Restv. |  |  |
|      | Date Spudded   |       |       |                                | Date Co         | npl. Ready  | to Pro        | od.  | Total D  | epth  | P.B.T.D.     | D  |                |                |  |  |
|      | Elevations (DF, RKB, R1  | T, GR | , etc | Name of Producing Formation    |                 |   |               |  | Top Oil  | Top Oil/Gas Pay Tubing Dep  |              |  |                | th             |  |  |
|      | Perforations   |       |       |                                |                 |   |               |  |  |   |              | Depth Casing Shoe                                |                |                |  |  |
|      | TUBING, CASING, AND CEMENTING RECORD   |       |       |                                |                 |   |               |  |  |   |              |  |                |                |  |  |
|      | HOLE SIZ   |       | CA    | CASING & TUBING SIZE DEPTH SET |                 |   |               |  | SACKS CEMENT   |   |              |  |                |                |  |  |
|      |  |       |       |                                |                 |   |               |  |  |   |              | <del>                                     </del> | 25 3           | -800/          |  |  |
|      |  |       |       |                                |                 |   |               |  | 1  |   |              |  | 37.7           | 5,00 A         |  |  |
|      |  |       |       |                                |                 |   |               |  |  |   |              | .i   |                | <u>/</u>       |  |  |
| V.   | TEST DATA AND RI   | EQU   | EST   | FO                             | R ALL           | OWABLE  | (T            |  | depth or be  | ery of total volu<br>for full 24 hours  | r)           |  | qual to or exc | eed top allow  |  |  |
|      | Date First New Oil Run   | To To | nk s  |                                | Date of         | Test  | •             |  | Produci  | Producing Method (Flow, pump, gas lift, etc.)   |              |  |                |                |  |  |
| ŀ    | Length of Test   |       |       |                                | Tubing Pressure |   |               |  | Casing   | Pressure  |              | Choke Size                                       |                |                |  |  |
|      | Actual Prod. During Test   | t     |       |                                | Oil-Bbl         | 1.  | ••••          |  | Water - E  | Bble.   |              | Ggs-MCF  | <del></del>    |                |  |  |
|      |  |       |       |                                |                 |   |               |  |  |   |              |  |                |                |  |  |
|      | GAS WELL   |       |       |                                |                 |   |               |  |  | 12  |              |  |                |                |  |  |
|      | Actual Prod. Test-MCF/   | P     |       |                                | Length o        | f Test  |               |  | Bbls. C  | ondensate/MMC   | F .          | Gravity of                                       | Condensate     |                |  |  |
|      | Testing Method (pitot, be  | ack p | r.)   |                                | Tubing F        | reseure (S)   | hut-          | in )   | Casing   | Pressure (Shut  | -ia)         | Choke Size                                       |                |                |  |  |
| VI.  | CERTIFICATE OF COMPLIANCE  |       |       |                                |                 |   |               |  |  | OIL   | CONSERVA     | TION COM   | MISSION        |                |  |  |
|      | A CONTRACTOR OF THE CONTRACTOR |       |       |                                |                 |   |               | one ervetio  | APPROVED JAN 2 4 1980  |   |              |  |                |                |  |  |
|      | 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.   |       |       |                                |                 | 3   | 21 a Gressett |  |  |   |              |  |                |                |  |  |
|      |  |       |       |                                |                 |   |               |  |  | TITLE SUPERVISOR DISSERICT H  |              |  |                |                |  |  |
|      | 0  |       |       |                                | <b>^</b> -      | ١.  | i             |  |  | This form is to   |              |  |                |                |  |  |
|      | Authorized Agent   |       |       |                                |                 |   |               | 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. |  |   |              |  |                |                |  |  |
|      |  |       |       |                                |                 |   | teets         |  |  |   |              |  |                |                |  |  |
| •    |  |       |       | (Titl                          | (4)             |   |               |  | able   | All sections of this form must be filled out completely for allowable on new and recompleted wells.                                     |              |  |                |                |  |  |
|      | 0c   | tob   |       | 31 .<br>(Dat                   | . 1979<br>•)    |   |               |  | weil   | Fit1 out only Sections I, II. III, and VI for changes of owner, weil name or number, or transporter, or other such change of condition. |              |  |                |                |  |  |

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