---DISTRIBUTION SANTA FE FILE

October 31, 1979 (Date)

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND

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

	U.S.G.S.	AUTHORIZATION TO TRANSPORT OIL AND NATURAL BAS C E I V E D					
	TRANSPORTER OIL	-	Btanss				
	GAS OPERATOR			NOV 1 1979			
ı.	PRORATION OFFICE				0.00		
	Operator Mobil Producing Texas	ARTESIA, OFFICE					
	Address						
	9 Greenway Plaza, Suite 2700, Houston, TX 77046 Reason(s) for filing (Check proper box) Other (Please explain)						
	New Well	Change in Transporter of:	1		tor name fro	m 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						
11.	DESCRIPTION OF WELL AND	LEASE Well No. Pool Name, Including F		Trind of t			
	West Henshaw Unit Tract	1 3 3 3 3 3 3		Kind of Lease State, Federal		Legse No. al NM06407-B	
	Location						
	Unit Letter; 300	Feet From The North	ne and 1000	Feet From T	heEast	···	
	Line of Section 4 To	wnship 16-S Range	30-E , NMPN	۸,	Eddy	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 se					is to be vent)	
	Name of Authorized Transporter of Ca	Address (Give address to which approved copy of this form is to be sent)					
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.	Is gas actually connect	ed? Whe	n		
137	If this production is commingled with that from any other lease or pool, give commingling order number:						
	Designate Type of Completic	Oil Well Gas Well	New Well Workover	Deepen	Plug Back Same	Res'v. Diff. Res'v.	
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	. 1.	P.B.T.D.		
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay		Tubing Depth		
	Perforations				Depth Casing Shoe		
	TUBING, CASING, AND CEMENTING RECORD						
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT		
					<u>i</u>		
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	u, pump, gas life	t, etc.)		
	Length of Test	Tubing Pressure	Casing Pressure		Choke Size	· <u></u> .	
	Actual Prod. During Test	Oil - Bble.	Water - Bbls.		Gas • MCF		
[GAS WELL						
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF		Gravity of Condensate		
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut	-in)	Choke Size		
VI	CERTIFICATE OF COMPLIANCE		OIL	CONSERVA	TION COMMISS	SION	
•••			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		APPROVED TO STATE OF THE STATE				
	above is true and complete to the best of my knowledge and belief.		BY CONTROL TO THE PROPERTY H				
	_		TITLE SUPERVISOR, DISTRICT H				
	Book Mariahn)		This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepened				
•	(Senature)		il melt this form mus	well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with AULE 111.			
	Authorized		All sections of this form must be filled out completely for allow-				
	्रि स	able on new and recompleted wells.					

able 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