	NO. OF COPIES RECEIVED				
	DISTRIBUTION SANTA FE	NEW MEXICO OIL O	CONSERVATION COMMISSION	Form C-104	
	FILE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-110 Effective 1-1-65	
	U.S.G.S.		AND ANSPORT OUL AND NATURAL		
	LAND OFFICE	LAND OFFICE AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
	TRANSPORTER GAS 1/1	4			
	OPERATOR J	-		NOV 1 1979	
1.	PRORATION OFFICE	1			
	Operator Mobil Producing Texas & New Mexico Inc.				
Address			ARTESIA, DEFICE		
	9 Greenway Plaza, Suite 2700, Houston, TX 77046				
	Reason(s) for filing (Check proper box) Other (Please explain)				
	New Well	Change in Transporter of: Oil Dry Go	To change Opera	ator name from Mobil Oil	
	Change in Ownership	Casinghead Gas Conde		e Date: 1-1-1980)	
				<u> </u>	
	If change of ownership give name and address of previous owner		·····		
II	DESCRIPTION OF WELL AND	TFASE			
	Lerse Name West Henshaw	Well No. Pool Name, Including F		Lease No.	
		0   1 Henshaw Graybu	arg West State, Federa	norFee Federal LC-06407-	
	Jocation X . 660 Feet From The South Line and 660 Feet From The East				
	Unit Letter X; 660	Feet From The South Lir	re andFeet From	The East	
	Line of Section 5 Tox	wnship 16-S Range	30-Е, ммрм,	Eddy County	
			-		
ш.	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil Grader or Condensate Address (Give address to which approved copy of this form is to be sent)				
	Navajo Refining Co 🔒	beline Dirs	Box 175 Artesia N	IM 88210	
	Name of Authorized Transporter of Car Phillips Petroleum Comp	Inghead Gas Syde or Dry Gas	Address (Give address to which appro Box 6666 Odessa, Texas	ved copy of this form is to be sent?	
	Continental Oil Company	Unit Sec. Twp. Pge.	Box 460 Hobbs, New Mex	rico 88240	
	If well produces ail or liquids, give location of tanks.	L 3 16-S 30-E	Yes	1-60	
	If this production is commingled with	th that from any other lease or pool,	give commingling order number:		
	COMPLETION DATA	Oil Weil Gas Weil			
	Designate Type of Completio		New Weil Workover Deepen	Plug Back Same Res'v. Diff. Res'v.	
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
	Perforations		1	Depth Casing Shoe	
			D CEMENTING RECORD		
	HOLESIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
L/	TECT DATA AND DECUEST E				
۷.	<b>EST DATA AND REQUEST FOR ALLOWABLE</b> (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow able 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	Oli-Bbis.	Water-Bbls.	Gas - MCF	
	GAS WELL				
[	Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate	
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
 V1	CERTIFICATE OF COMPLIANO	CE			
* #•	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.		IAM 2.4 1380		
			BY_ W.a. Suscett		
			TITLE		
	Authorized Agent		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 allow- 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 filled for each pool in multiply		
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	October 31, 1979				
•	(Date)				