HO. OF COPIES REC	LIVEO	1	
DISTRIBUTION			
SANTA FE			
FILE			
U.\$.G.\$.			
LAND OFFICE			
TRANSPORTER	OIL	<u>i_</u>	
	GAS	1	
OPERATOR		I	
PRORATION OFFICE			

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

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

	U.S.G.S. LAND OFFICE	AUTHOR	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS CEIVED					
	TRANSPORTER GAS /							
1.	OPERATOR PROPATION OFFICE		NOV 1 1979					
Mobil Producing Texas & New Mexico Inc. ARTESIA. 0								
	9 Greenway Plaza, Sui	te 2700, H	ouston, TX 77	7046				
	Reason(s) for filing (Check proper box)	······································			Other (Please explain)			
	New Well	·	ransporter of: Dry Ga		To change Operator name from Mobil Oil Corporation.			
	Recompletion Change in Ownership	Oil Casinghead		— 	=	Date: 1-1-1980)		
ļ	If change of ownership give name and address of previous owner							
IJ.	DESCRIPTION OF WELL AND I		ool Name, Including F	ormation	Kind of Leas	•	Lease No.	
	Lake Premier Unit		orth Sq Lake Graybu		North State, Federa	Horfee Federal E	-6484	
	Location Unit Letter X : 660	Feet From	The South Lin	e and	660 Feet From	The East		
		mship 16-S	Range	31-E	, NMPM,	Eddy	County	
14.	DESIGNATION OF TRANSPORT	ER OF OIL A	ND NATURAL GA	s				
	Name of Authorized Transporter of Oil	XX or Con	densate	Address (Give address to which approved copy of this form is to be sent) Box 159 Artesia, NM 88210			vent)	
	Navajo Refining Co, Kame of Authorized Transporter of Cas	in head Gas XX		Address	Give address to which appro	ved copy of this form is to be	sent)	
	Phillips Petroleum Co					M 88240		
	If well produces oil or liquids, give location of tanks.	Unit Sec.	Twp. Rge. 16-S 31-E	1	tually connected? Wh	en 1961		
١V	If this production is commingled wit COMPLETION DATA			give com	ningling order number:			
∀ •	Designate Type of Completio		Well Gas Well	New Well	Workover Deepen	Plug Back Same Resty.	Diff. Res'v.	
	Date Spudded	Date Compl. Re	ady to Prod.	Total De	pth	P.B.T.D.		
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth		
	Perforations		<u>İ</u>		Depth Casing Shoe	Depth Casing Shoe		
	1 30101011111				CEMENTING RECORD			
	HOLE SIZE		BING, CASING, AN & TUBING SIZE	CEMEN	DEPTH SET	SACKS CEMEN	т	
	HOLE SIZE							
V.	TEST DATA AND REQUEST FO		ILE (Test must be a able for this d	epth or be j	or full 24 hours)	and must be equal to or exce	ed top allow-	
	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-Bbls.		Water - B	ble.	Gas-MCF		
		<u>.l</u>						
	GAS WELL Actual Prod. Test-MCF/D	Length of Test		Bbis. Co	endensate/MMCF	Gravity of Condensate		
	Teeting Method (pitos, back pr.)	Tubing Pressur	e(shut-in)	Casing	Pressure (Shut-in)	Choke Size	-	
			,			ATION COMMISSION		
VI.	CERTIFICATE OF COMPLIAN	CE			t n n 1 9			
	hereby certify that the rules and regulations of the Oil Conservation		APPROVED					
	Commission have been complied with and that the information gives above is true and complete to the best of my knowledge and belief				N			
				TITLE SUPERVISOR, DISTRICT II				
	D			1	his form is to be filed in	compliance with RULE 1	104.	
Kabbie &					this is a request for all	request for allowable for a newly drilled or deepened must be accompanied by a tabulation of the deviation		
	(Signature) // / Authorized Agent				Il tests taken on the Well ID accordance with which it			
					All sections of this form must be filled out completely for sllow-			

(Title)

October 31, 1979 (Date)

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