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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-105
Effective 1-1-65

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DEC 21 1966

Operator Mobil Oil Corporation		O. C. C. ARTESIA, OFFICE	
Address Box 633, Midland, Texas 79701			
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well ☐	Change in Transporter of: Oil ☐ Dry Gas ☐ Casinghead Gas ☐ Condensate ☐	Name change & Well No. due to Unitization. Jake Lawless Drilling Company Lawless-Gulf, Federal Well #2	
Completion ☐			
Change in Ownership ☒			

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE		Well No.		Pool Name, Including Formation		Kind of Lease		Lease No.	
Northeast Square Lake Premier Unit		14		Square Lake North Grayburg S.A., North		Federal		NM026352	
Location									
Unit Letter		C		660		Feet From The		North	
Line of Section		9		Township		16-S		Range	
						31-E		, NMPM,	
						Eddy		County	

TRANSPORTATION OF TRANSPORTED 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 sent)				
Continental Pipe Line Company			Box 410, Artesia, N. M.				
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐			Address (Give address to which approved copy of this form is to be sent)				
Phillips Petroleum Company			Box 2130, Hobbs, N. M.				
If well produces oil or liquids, give location of tanks.		Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
		C	9	16-S	31-E	Yes	1962

If this production is commingled with that from any other lease or pool, give commingling order number:

CONNECTION DATA		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Designate Type of Completion - (X)									
Date Spudded		Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, CR, 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			

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (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, pump, gas lift, etc.)			
Length of Test		Tubing Pressure		Casing Pressure		Choke Size	
Actual Prod. During Test		Oil-Bbls.		Water-Bbls.		Gas-MCF	

GAS WELL							
Actual Prod. Test-MCF/D		Length of Test		Bbls. Condensate/MMCF		Gravity of Condensate	
Testing Method (pilot, back pr.)		Tubing Pressure (shut-in)		Casing Pressure (shut-in)		Choke Size	

VI. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
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.		APPROVED <u>DEC 21 1966</u> , 19	
<u>G. A. Payne</u> Authorized Agent		BY <u>W. A. Gressett</u>	
(Signature)		TITLE <u>OIL AND GAS INSPECTOR</u>	
(Title)			
December 19, 1966		This form is to be filed in compliance with RULE 1104.	
(Date)		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, well name or number, or transporter, or other such change of condition.	
		Separate Forms C-104 must be filed for each pool in multiply completed wells.	