

74-11-121

LLANO, INC.

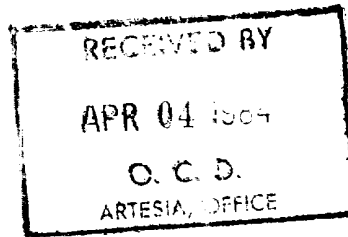
PHONE 393-2153

P. O. DRAWER 1320

HOBBS, NEW MEXICO 88241

AL KLAAR
VICE PRESIDENT
SUPPLY, MARKETING, AND
OIL & GAS OPERATIONS

April 2, 1984



Mobil Producing TX & NM, Inc.
Nine Greenway Plaza
Suite 2700
Houston, Texas 77046

Attention: Paula A. Collins

Re: New Mexico OGD
Form C-104
Federal "OO" No. 2 Well
Delaware Formation
Eddy County, New Mexico

Gentlemen:

The attached Form C-104 designates Llano, Inc. as the authorized transporter of casinghead gas for the referenced well. Llano, Inc. does not transport or purchase the casinghead gas from this well. Furthermore, Llano will not transport or purchase this gas until our strict quality specifications and pressure requirements can be met.

Please issue a revised C-104 which does not designate Llano, Inc. as your transporter of this gas.

Very truly yours,

LLANO, INC.

Al Klaar

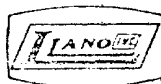
AK/SP:nvz

Attachment

xc: Donald L. Garey
GP-35

New Mexico Oil Conservation Division
P. O. Drawer DD
Artesia, New Mexico 88210

Llano File No. K.04.03.84



A SUBSIDIARY OF HOUSTON NATURAL GAS CORPORATION

RECEIVED MAR 22 1984

TTF

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

NO. OF COPIES RECEIVED	
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LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION	
RECEIVED BY	
REQUEST FOR ALLOWABLE BY	
AND	
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS	
MAY 10 1984	
O. C. D.	O. C. D.
ARTESIA, OFFICE	ARTESIA, OFFICE

I. Operator
Mobil Producing TX. & N.M. Inc.

Address
Nine Greenway Plaza, Suite 2700, Houston, Texas 77046

Reason(s) for filing (Check proper box)
 New Well ☐ Change in Transporter of:
 Recompletion ☒ Oil ☐ Dry Gas ☐
 Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

Other (Please explain)
CASINGHEAD GAS MUST NOT BE
FLARED AFTER 4-21-84
UNLESS AN EXEMPTION FROM
THE M.L.M. IS OBTAINED

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Federal 00	2	Wildcat (Delaware)	State, Federal or Fee Federal	0560291
Location				
Unit Letter	C	660 Feet From The North	Line and 1980	Feet From The West
Line of Section	28	Township 21S	Range 27E	NMPM, Eddy County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
The Permian Corporation	P. O. Box 3119, Midland, TX 79701
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Llano, Inc.	P. O. Box 1320, Hobbs, NM 88240
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
C 28 21S 27E No	

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
X	X			X		X		X
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
10/03/83	02/04/84	11500	3896					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
3208 GR, 3212 DF	Delaware	3800	3890					
Perforations	Depth Casing Shoe							
3800-3820, 1 JSPF, 19 holes	11500							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
17-1/2	13-3/8	600	1940					
11	8-5/8	2600	3375					
7-7/8	5-1/2	11500	1350					
	2-3/8	3890						

V. 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.)	
02/04/84	03/01/84	Pump	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hours			
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
411 Bbls.	15	138	30

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

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.

Paula W. Collins
(Signature)
Authorized Agent
(Title)
03/08/84
(Date)

OIL CONSERVATION COMMISSION

APPROVED MAR 21 1984, 19
BY Original Signed By
Leslie A. Clements
TITLE Supervisor District II

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 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