

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	✓
FILE	✓
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	✓
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND

Form C-104
Supersedes Old C-104 and C-1
Effective 1-1-85

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS
RECEIVED BY

MAR 11 1985

O. C. D.

ARTESIA, OFFICE

Operator
Mobil Producing Texas & New Mexico Inc.
Address
9 Greenway Plaza - Suite 2700 - Houston, TX 77046

Reason(s) for filing (Check proper box)

New Well ☐

Recompletion ☒

Change in Ownership ☐

Change in Transporter of:

Oil ☐

Casinghead Gas ☐

Dry Gas ☐

Condensate ☐

Other (Please explain)

To change pool name.

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Federal "RR" Com	Well No. 1	Pool Name, Including Formation Undesignated W/C Wolfcamp	Kind of Lease State, Federal or Fee Federal NM	Lease No. 027994-D
Location Unit Letter N; 660 Feet From The South Line and 1980 Feet From The West Line of Section 24 Township 23-S Range 26-E, NMPM, Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> NONE	Address (Give address to which approved copy of this form is to be sent)					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Llano, Inc.	Address (Give address to which approved copy of this form is to be sent) Box 1320 - Hobbs, NM 88240					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected? YES	When 12-19-84

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 Restv.	Diff. Restv.
		X				X		X
Date Spudded 1-1-74	Date Compl. Ready to Prod. 2-20-85	Total Depth 12,005	P.B.T.D. 10,165					
Elevations (DF, RKB, RT, GR, etc.) 3237-GR	Name of Producing Formation Giseo Wolfcamp	Top Oil/Gas Pay 9923	Tubing Depth 11,478					
Perforations 9923-9954	Depth Casing Shoe							

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
	13-3/8		Post ID-2
	9-5/8	Original casing undisturbed	3-29-85
	2-3/8	11,478	Comp. w/lfop.

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 12-19-84	Date of Test 2-20-85	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size 3/4"
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D 22	Length of Test 24 hrs.	Bbls. Condensate/MMCF 22,000	Gravity of Condensate O
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in) 660#	Casing Pressure (Shut-in) 600#	Choke Size 3/4"

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.

Nancy Lewis
(Signature)

Authorized Agent

3-5-85

(Title)

(Date)

OIL CONSERVATION COMMISSION

APPROVED MAR 27 1985, 19

BY ORIGINAL SIGNED
BY LARRY BROOKS
GEOLOGIST - NMOC

TITLE
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