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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-110  
Effective 1-1-65

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APR 30 1981

AMERICAN OFFICE

I. Operator  
Mobil Producing TX. & N.M. Inc. ✓  
Address  
9 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)

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name State "SS"	Well No. 2	Pool Name, Including Formation So. Carlsbad - Atoka	Kind of Lease State, Federal or Fee State	Lease No. L-430
Location Unit Letter <u>K</u> : <u>1980</u> Fee: From The <u>South</u> Line and <u>1980</u> Feet From The <u>West</u> Line of Section <u>20</u> Township <u>23S</u> Range <u>27E</u> , NMPM, <u>Eddy</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> N/A	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 type="checkbox"/> Llano, Inc.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1320, Hobbs, NM 88240					
If well produces oil or liquids, give location of tanks.	Unit K	Sec. 20	Twp. 23	Pge. 27	Is gas actually connected? Yes	When 4-30-81

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
Date Spudded	Date Compl. Ready to Prod. 4-8-81		Total Depth 12,250		P.B.T.D. 11,432			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation Atoka		Top Oil/Gas Pay 11,240		Tubing Depth 11,225			
Perforations Atoka 11,240-11,406					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17 1/2	13 3/8		356		400			
12 1/4	9 5/8		3500		3100			
8 1/4	5 1/2 liner		5285-12247		1600			

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.)	
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 86	Length of Test 24 hours	Bbls. Condensate/MMCF 0	Gravity of Condensate N/A
Testing Method (pitot, back pr.) Flowing	Tubing Pressure (Shut-in) 485	Casing Pressure (Shut-in) 0	Choke Size 1/2"

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.

R. L. Hogan  
(Signature)  
Authorized Agent  
(Title)  
April 21, 1981  
(Date)

OIL CONSERVATION COMMISSION

APR 30 1981

APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY W. A. Gressett  
SUPERVISOR, DISTRICT II  
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