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U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

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-112
Effective 1-1-65

RECEIVED

AUG 25 1975

I. Operator
Mobil Oil Corporation

Address
Box 633, Midland, Texas 79701

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: Corral Draw Unit
Well No.: 2
Pool Name, including Formation: Corral Draw Wolfcamp
Kind of Lease: Federal
Lease No.: NM14778

Location
Unit Letter: K; 1580 Feet From The South Line and 1980 Feet From The West
Line of Section: 22 Township: 25-S Range: 29-E, NMPM, Eddy County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒
The Permian Corporation
Address (Give address to which approved copy of this form is to be sent)
Box 1183, Houston, Texas 77001

Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒
Waiting on gas contract
Address (Give address to which approved copy of this form is to be sent)

If well produces oil or liquids, give location of tanks.
Unit: K Sec.: 22 Twp.: 25-S Rge.: 29-E
Is gas actually connected? no When: waiting on gas contract

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					
Date Spudded 12-15-74	Date Compl. Ready to Prod. 8-10-75	Total Depth 13840	P.B.T.D. 12638					
Elevations (DF, RKB, RT, GR, etc.) 3062 GR	Name of Producing Formation Wolfcamp	Top Oil/Gas Pay 11560	Tubing Depth 11463					
Perforations 11560-11582	Depth Casing Shoe 13860							

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2	13-3/8	350	400x
12-1/4	9-5/8	3097	1500x
8-3/4	7-7/8	10982	925x
6-1/4	5-1/2 liner	13128	400x
4-5/8	3-1/2 liner	13840	80x

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.) Flowing	
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 620	Length of Test 24 hrs	Bbls. Condensate/MMCF .7	Gravity of Condensate 62.4
Testing Method (pitot, back pr.) Back Pr.	Tubing Pressure (Shut-in) 5456	Casing Pressure (Shut-in) 1200	Choke Size Varied

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.

Authorized Agent
8-22-75

OIL CONSERVATION COMMISSION

SEP 18 1975

APPROVED BY
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