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Appropriate District Office  
DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico  
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

Form C-104  
Revised 1-1-89  
See Instructions  
at Bottom of Page

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

~~CONFIDENTIAL~~

Operator MOBIL PRODUCING TX & NM INC. (MOBIL EXPLORATION & PRODUCING U.S.)		Well API No. Agent)
Address P. O. Box 185, Bloomfield, NM 87413		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name Harrington Federal 28	Well No. 1Y	Pool Name, including Formation W. Puerto Chiquito Mancos	Kind of Lease State, Federal or Fee	Lease No. SF-079352A
Location Unit Letter <u>G</u> : <u>2310</u> Feet From The <u>North</u> Line and <u>2115</u> Feet From The <u>East</u> Line Section <u>28</u> Township <u>24N</u> Range <u>1W</u> , <u>NMPM</u> , <u>Rio Arriba</u> 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) P. O. Box 1183, Houston, TX 70978	
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) P. O. Box 1492, El Paso, TX 79978	
If well produces oil or liquids, give location of tanks.	Unit <u>G</u>	Sec. <u>28</u>
	Twp. <u>24N</u>	Rge. <u>1W</u>
	Is gas actually connected? <u>No</u>	When? <u>Approx. May 1989</u>

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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 12/28/88	Date Compl. Ready to Prod. 2/21/89		Total Depth 8000'		P.B.T.D. 7935'			
Elevations (DF, RKB, RT, GR, etc.) GR 7380'; KB 7392'	Name of Producing Formation Gallup		Top Oil/Gas Pay 6610'		Tubing Depth 8000'			
Perforations 6610'-6740', 6776'-6840'					Depth Casing Shoe 8000'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/2	13-3/8		400'		280 cu. ft.			
12-1/2	7		8000'		4500 cu. ft.			
	9 5/8		3486		186 SY.			

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 for full 24 hours)			
Date First New Oil Run To Tank 2/27/89	Date of Test 3/15/89	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hours	Tubing Pressure 30#	Casing Pressure 30#	Choke Size MAR 21 1989
Actual Prod. During Test	Oil - Bbls. 35	Water - Bbls. 57	Gas - MCF 39

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. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

E. T. Barber  
Signature  
E. T. Barber Sr. Production Foreman  
Printed Name  
3/16/89 Date  
505/632-1891 Telephone No.

OIL CONSERVATION DIVISION

Date Approved MAR 21 1989

By Original Signed by FRANK T. CHAVEZ

Title SUPERVISOR DISTRICT # 3

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.