Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION P.O. Box 2088

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DISTRICT II P.O. Drawer DD, Artesia, NM 88210 Santa Fe, New Mexico 87504-2088 DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Well API No. Operator 30-039-25178 Mobil Producing Texas & New Mexico Inc. Address % Mobil Exploration & Producing US Inc. P 0 Box 633 Midland, TX 79702 Reason(s) for Filing (Check proper box) inge in Transporter of: New Well Dry Gas Recompletion Oil Condensate Change in Operator If change of operator give name and address of previous operator II. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including Formation Kind of Lease Lease No. Lease Nam State, Federal or Fee SF-078908 Lindrith Dakota Lindrith B Unit 84 Location Feet From The South Line and 540 Feet From The West 990 Unit Letter ___ 24N 2W , NMPM, Rio Arriba County 16 Township Range Section III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) or Condensate Name of Authorized Transporter of Oil X Rep. Pl. 370 17st. Ste. 5300, Denver, CO 80202 Gary - Williams Energe Corp. Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Casinghead Gas XX or Dry Gas P 0 Box 1492, ELPaso, TX 79978 ElPaso Natural Gas Co. When? Rge. Is gas actually connected? If well produces oil or liquids, Unit Sec Twp. give location of tanks. If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Diff Res'v New Well Workover Deepen Plug Back Same Res'v Oil Well Gas Well Designate Type of Completion - (X) Χ Total Depth P.B.T.D. Date Spudded Date Compl. Ready to Prod. 7756 7-22-92 7935 6-23-92 Top Oil/Gas Pav Tubing Depth Name of Producing Formation Elevations (DF, RKB, RT, GR, etc.) 7935 7740 GL: 7205 Dakota Depth Casing Shoe Perforations 7740-7774 TUBING, CASING AND CEMENTING RECORD SACKS CEMENT DEPTH SET HOLE SIZE CASING & TUBING SIZE 550sx 17 1/2 13 3/8 475 1320sx 7935 5 1/2 8 3/4 2 7/8 7935 V. TEST DATA AND REQUEST FOR ALLOWABLE st be equal to or exceed top allowable for this depth or be for full 24 hours.) OIL WELL (Test must be after recovery of total volume of load oil and n Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tank Date of Test PUMP 8-10-92 7-23-92 Choke Size Casing Pressure Length of Test **Tubing Pressure** 24 Gas- MCF Water - Bbis. Actual Prod. During Test 5.0 0 **GAS WELL** Gravity of Condensate Bbis, Condensate/MMCF Actual Prod. Test - MCF/D Length of Test Casing Pressure (Shut-in) Choke Size Tubing Pressure (Shut-in) Testing Method (pitot, back pr.) 50 VL OPERATOR CERTIFICATE OF COMPLIANCE OIL CONSERVATION DIVISION I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above AUG 1 3 1992 is true and complete to the best of my knowledge and belief. Date Approved Shuley h.bol. By_ Signature

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

Fnv. & Rea

(915) 688-2585

Shirley Todd

Date

8-10-92

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.

Title.

SUPERVISOR DISTRICT #3

2) All sections of this form must be filled out for allowable on new and recompleted wells.

Title

Telephone No.

- 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.