NO. OF COPIES RECEIVED		15	1		
DISTRIBUTION					
SANTA FE		ΓT			
FILE					
U.S.G.S.					
LAND OFFICE					
TRANSPORTER	OIL	<u> </u>			
TARAST OTTICA	GAS				
OPERATOR		2			
PRORATION OF					
Operator					
Mobil Producing Texas					

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104

	SANTA FE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-110	
	AND U.S.G.S. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS LAND OFFICE				
	OIL				
	TRANSPORTER GAS				
	OPERATOR 2				
1.	PRORATION OFFICE			•	
••	Operator				
	Mobil Producing Texas & New Mexico Inc.				
9 Greenway Plaza, Suite 2700, Houston, TX 77046 Reason(s) for filing (Check proper box) Other (Please explain)					
					New Well Change in Transporter of: To change Operator name Recompletion Oil Dry Gas Corporation.
	Recompletion Oil Dry Gas Corporation. Change in Ownership Casinghead Gas Condensate (Effective Date: 1-1-198)				
	(Ellective Bate: 1-1-1980)				
	If change of ownership give name and address of previous owner				
	and address of previous owner				
IJ.	DESCRIPTION OF WELL AND I	LEASE			
	Lease Name Jicarilla D	Well No. Pool Name, Including Fo	** 1	Todae i.c.	
	Location B 1650) Fast	990	North	
	Unit Letter;;	O Feet From The East Line	e and 990 Feet From 1	The NOI til	
	14-2-4 Section 24 Tem	mship 26-N Range	3-W , NMPM.	Rio Arriba County	
	Line of Section 24 Tow	namp == 1. Runge	, Marca,	County	
ш.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	s		
	Name of Authorized Transporter of Oil		Address (Give address to which approx	ved copy of this form is to be sent)	
	NONE				
	Name of Authorized Transporter of Cas	inghead Gas or Dry Gas XXX	Address (Give address to which approx	ved copy of this form is to be sent)	
Northwest Pipeline Corp		3539 E. 30th St, Farmington, NM 87401			
	If well produces oil or liquids,	Unit Sec. Twp. P.ge.	Is gas actually connected? Whe	en	
	give location of tanks.		YES		
		h that from any other lease or pool,	give commingling order number:	2200	
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.	
	Designate Type of Completio				
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
				·	
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
	Perforations			Depth Casing Shoe	
		· · · · · · · · · · · · · · · · · · ·	DEPTH SET	SACKS CEMENT	
	HOLE SIZE	CASING & TUBING SIZE	DEPIRSE	3ACK3 CEMENT	
V.	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a)	fter recovery of total volume of load oil	and must be equal to or exceed top allow-	
• •	OIT WETT able for this depth or be for full 24 hours)				
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas li	it, etc.)	
			Casing Pressure	Choke Size	
	Length of Test	Tubing Pressure	Coming Pressure		
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gan-MC	
	Actual Prod. During 1950			The state of the s	
	·	1	<u> </u>	OCT 29 19/9	
	GAS WELL			1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity (Offigenhalis	
				M21. 3	
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
		<u> </u>			
VI.	CERTIFICATE OF COMPLIANCE OIL CONSERV		OIL CONSERVA	TION COMMISSION	
			APPROVED 001 2 9 1979		
	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. Buckey Durjahr (Signature)		Original Signed by A. R. Rendriek		
			BY Utigation satisfies to the Residence		
			TITLE CONTRIGOR DISTRICT REPORT 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		
	Authorized	U L Agent	All sections of this form must be filled out completely for allowable on new and recompleted wells.		
	Authorized (Ti	ile)			
	October 31, 1979		Fill out only Sections I. II. III. and VI for changes of owner,		
	(Da	ite)		well name or number, or transporter, or other such change of condition. Separate Forms C-104 must be filed for each pool in multiply	
			Separate Forms C-104 mus	of tited to: seem boot in manthis	