40. 01 COPISS REC	EIVED	i	
DISTRIBUTIO	ON		
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
		7	

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND

Form C-104
Supersedes Old C-104 and C-11/
Effective 1-1-65

	U.S.G.S. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			AS		
	LAND OFFICE					
	TRANSPORTER GAS	-				
	OPERATOR PROPATION OFFICE	·				
2.	Operator Mobil Producing TX. & N.M. Inc.					
	Address Nine Greenway Plaza, Suite 2700, Houston, Texas 77046					
Reason(s) for filing (Check proper 63%) Other (Please explain)				ndensate gatherer to		
	Recompletion	Oil Dry Ga	 The Permian Corp. 	, effective November 1,		
	Change in Ownership	Casinghead Gas Conden	1984.			
	If change of ownership give name and address of previous owner					
11.	DESCRIPTION OF WELL AND	Well No. Pool Name, Including Fo		Jicarillia Vicarillia		
	Jicarilla G	3-A Blanco Mesa	Vende State, Federal	Federal Contract #95		
	Unit Letter D 59	O Feet From The Northing	e and 990 Feet From 1	Wost		
	Line of Section 35 To	whiship 27-N Range 3-	-W , NMPM, Rio A	rriba County		
111.	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	S Address (Give address to which approx	ed copy of this form is to be sent)		
	The Permian Corporation	1	P. O. Box 1183, Houston	n, Texas 77001		
	Northwest Pipeline Cor		Address (Give address to which approx 3539 E. 30th St., Farm			
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. 35 27-N 3-W	Is gas actually connected? Whe Yes	n		
	If this production is commingled win	th that from any other lease or pool,	give commingling order number:	,		
•••	Designate Type of Completi	on - (X)	New Well Workover Deepen	Plug Back Same Resty. Diff. Resty.		
	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 TUBING, CASING, AND		Depth Casing Shoe			
			CEMENTING RECORD			
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
V.	TEST DATA AND REQUEST FOIL WELL	OR ALLOWABLE (Test must be a) able for this de	pth or be for full 24 hours)	and must be equal to or exceed top allow-		
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lif	i, eic.)		
	Length of Test	Tubing Pressure	Casing Pressure	Chote Size		
	Actual Prod. During Test	Oil-Bbis.	Water-Bble. NOV UP	Gas - MCF		
	GAS WELL		on con. biv			
			Bble. Condensate/MMCF	Gravity of Condensate		
	Actual Prod. Test-MCF/D	Length of Test				
	Testing Method (putot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size		
VI.	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.			TION COMMISSION		
			APPROVED NOV 3/1984 19			
			SUPERVISOR DISTRICT # 3			
		• • /	This form is to be filed in a	compliance with RULE 1104.		
	(Signature) Authorized Agent (Title) 10-2:6-84 (Date)		If this is a request for allowable for a newly drilled or despended well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111. Att sections of this form must be filled out completely for allow-			
			able on new and recompleted we	able on new and recompleted wells.		
			well name or number, or transporter, or other such change of condition. Separate Forms C-104 must be filed for each pool in multiply			
			Peparate Forms C-104 must be tited for each boot on manufall			