

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

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

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

**REQUEST FOR ALLOWABLE AND AUTHORIZATION
 TO TRANSPORT OIL AND NATURAL GAS**

I.

Operator Mobil Producing TX & NM Inc.	Well API No. 30-025-30538
Address % Mobil Exploration & Producing US P.O. Box 633, Midland, TX 79702	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Recompletion <input type="checkbox"/>	
Change in Operator <input type="checkbox"/>	
If change of operator give name and address of previous operator THIS WELL HAS BEEN PLACED IN THE POOL DESIGNATED BELOW. IF YOU DO NOT CONCUR NOTIFY THIS OFFICE.	

II. DESCRIPTION OF WELL AND LEASE

Lease Name State Sec. 17 Com	Well No. 3	Pool Name, Including Formation North Vacuum, Atoka Morrow	Kind of Lease <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal or Fee	Lease No. R-8931
Location Unit Letter <u>K</u> : <u>2064</u> Feet From The <u>West</u> Line and <u>2034</u> Feet From The <u>South</u> Line Section <u>17</u> Township <u>T-17-S</u> Range <u>35-E</u> , <u>NMPM</u> , <u>Lea</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> JM Petroleum Corp	Address (Give address to which approved copy of this form is to be sent) 2500 A. Linz Fin. Ctr., 2323 Bryan LB 18, Dallas TX 75201
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Phillips 66 Natural Gas Co.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 2105, Hobbs, NM 88240
If well produces oil or liquids, give location of tanks. Unit <u>K</u> Sec. <u>17</u> Twp. <u>T-17-S</u> Rge. <u>35E</u>	Is gas actually connected? <u>Yes</u> When? <u>06-27-89</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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
		<input checked="" type="checkbox"/>						
Date Spudded <u>03-24-89</u>	Date Compl. Ready to Prod. <u>05-25-89</u>	Total Depth <u>12120</u>	P.B.T.D. <u>12110</u>					
Elevations (DF, RKB, RT, GR, etc.) <u>KB 3993</u>	Name of Producing Formation <u>Atoka</u>	Top Oil/Gas Pay <u>11,972</u>	Tubing Depth <u>2700</u>					
Perforations <u>11,972-12,010</u>			Depth Casing Shoe					
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
<u>17-1/2</u>	<u>13-3/8</u>	<u>420</u>	<u>500 sx Cl. C</u>					
<u>11</u>	<u>8-5/8</u>	<u>5000</u>	<u>1950 sx Cl. C</u>					
	<u>2-7/8</u>	<u>2700</u>						
	<u>5-1/2 Liner</u>	<u>12120</u>	<u>1650 sx</u>					

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 Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
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 <u>2296</u>	Length of Test <u>24 hour</u>	Bbls. Condensate/MMCF <u>13.0</u>	Gravity of Condensate <u>53.2</u>
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in) <u>246</u>	Casing Pressure (Shut-in) <u>0</u>	Choke Size <u>48/64</u>

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.

Kaye Pollock
 Signature
 Kaye Pollock
 MOBIL EXPLORATION & PRODUCING U.S. INC.
 AS AGENT FOR MOBIL PRODUCING TX & NM INC.
 Title
 915-688-2584
 Telephone No.
 Date
 07-10-89

OIL CONSERVATION DIVISION
JUL 12 1989

Date Approved _____

By ORIGINAL SIGNED BY JERRY SEXTON
 DISTRICT I SUPERVISOR

Title _____

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.

cc: Sarah... 7/12/89

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RECEIVED
JUL 11 1989
OCD
HOBBS OFFICE