-	DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE TRANSPORTER OIL GAS OPERATOR PRORATION OFFICE	REQUEST	ONSERVATION COMMISSION FOR ALLOWABL AND NSPORT OIL AND NATURAL G	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65
1.	Operator			
	Mobil Oil Corporation			
	Address Three Greenway Plaza East, Suite 800, Houston, Texas 77046			
	Reason(s) for filing (Check proper box)	ast, Suite 800, Houston,	Texas 77046 Other (Please explain)	
	New Well	Change in Transporter of:		
	Recompletion X	Oil Dry Gar		
	Change in Ownership	Casinghead Gas Conden		·····
	If change of ownership give name and address of previous owner			
	und uddiess of providus owner			·
II.	DESCRIPTION OF WELL AND I	Well No. Pool Name, Including Fo	ormation Kind of Lease	Lease No.
	New Mexico B	4 Mescalero San	Andres State, Føderál	
	Location	······································		······································
	Unit Letter <u>G</u> ; <u>1980</u> Feet From The <u>north</u> Line and <u>1995</u> Feet From The <u>east</u>			
	Line of Section 27 Township 10S Range 32E , NMPM, Lea Co			
				a County
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS				
	Name of Authorized Transporter of Oil			
	Texas-New Mexico Pipe Line Co. Name of Authorized Transporter of Casinghead Gas or Dry Gas		P. O. Box 1510, Midland, Texas 79701 Address (Give address to which approved copy of this form is to be sent)	
	Warren Petroleum Corpo	ration	P. O. Box 1589, Tulsa,	Oklahoma 74102
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected? Whe	
	give location of tanks. A 27 10S 32E yes 1-13-77			
	If this production is commingled wit COMPLETION DATA	h that from any other lease or pool,	give commingling order number:	
		Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.
	Designate Type of Completio	<u> </u>		P.B.T.D.
	Date Spudded	Date Compl. Ready to Prod. 1–13–77	Total Depth 9682'	4200'
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
	4329 GR	San Andres	4042'	4188'
	Perforations Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD				L
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
	13-3/4"	10-3/4"	453'	475
	9-7/8"	7-5/8''	4480'	1850'
			l	
v.	TEST DATA AND REQUEST FO			and must be equal to or exceed top allow-
	OIL WELL able for this depth or be for full 24 hours) Date First New Oil Run To Tanks Date of Test Producing Method (Flow, pi			(i, etc.)
	1-13-77	1-25-77	Pump	
	Length of Teat	Tubing Pressure	Casing Pressure	Choke Size
	24 hours Actual Prod. During Test	Oil-Bbls.	Water - Bbis.	Gas-MCF
	Actual Prod. During Test	45	60	15.75
	l <u></u>			
	GAS WELL	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
	Actual Prod. Test-MCF/D	Length of leat	BDIB. CORDINATE MINOR	
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
VI.	CERTIFICATE OF COMPLIANC	CE		TION COMMISSION
	hereby certify that the rules and regulations of the Oil Conservation		APPROVED FEB 10 19/1	
	Commission have been complied w	ith and that the information given	BY DERVISOR DANKAR	
	above is true and complete to the	Dest of my knowledge and belief,		
	(Amilles		This form is to be filed in compliance with RULE 1104.	
	(CITCULL) (Signa	ture)	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 tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allow- able on new and recompleted wells. Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other auch change of condition. Separate Forms C-104 must be filled for each pool in multiply	
	Authorized Agent	/		
	(Tit	le)		
	2-7-77			
	(Da	le)		

ETP (1)77 ETP (1)77 OIL (1)78 B. I. M.