

NEW FIELD OR NEW PRODUCTION FIELD APPLICATION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form OCS-104
Supersedes OCS-101 and OCS-102
Effective 1-1-65

SALE PRICE		
DATE		
USGS		
CARD OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
REGISTRATION OFFICE		

I. Operator
Mobil Oil Corporation
Address
P. O. Box 633, Midland, Texas 79701
Reason(s) for filing (Check proper box)
New Well ☐ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Denton North	Well No.	8	Pool Name, including Formation	Denton-Wolfcamp	Kind of Lease	State, Federal or Fee	Fee	Lease No.
Location Unit Letter <u>P</u> ; <u>330</u> Feet From The <u>South</u> Line and <u>660</u> Feet From The <u>East</u> Line of Section <u>23</u> Township <u>14-S</u> Range <u>37-E</u> , NMPM, Lea County									

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
* See Attachment						
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Tipperary Resources Corporation	500 West Illinois, Midland, Texas 79701					
If well produces oil or liquids, give location of tanks.	Unit J	Sec. 26	Twp. 14-S	Range 37-E	Is gas actually connected? Yes	When 11-13-72

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 <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input checked="" type="checkbox"/>	Same Rest'n <input type="checkbox"/>	Diff. Rest'n <input checked="" type="checkbox"/>
Date 3-16-72 W.O. Started. 10-16-72	Date Compl. Ready to Prod. 10-31-72	Total Depth 12,699		P.B.T.D. 9545				
Elevations (DF, RAB, RT, GR, etc.) 3814 GR	Name of Producing Formation Wolfcamp		Top Oil/Gas Pay 9361		Tubing Depth 7473			
Perforations 1 JSPP Total of 87 Holes 9361-79, 9387-90, 9405-23, 9463-82, 9493-9518						Depth Casing Shoe		
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/4	13-3/8"		308		375 sxs.			
12-1/4	9-5/8"		4784		2400 sxs.			
8-3/4	7"		12699		500 sxs.			
	2-7/8"		7473					

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 Tanks 11-13-72	Date of Test 11-27-72	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hrs.	Tubing Pressure --	Casing Pressure --	Choke Size 2-7/8" Tubing
Actual Prod. During Test	Oil-Bbls. 244	Water-Bbls. 50	Gas-MCF 18.8

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

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.

Authorized Agent

November 29, 1972

OIL CONSERVATION COMMISSION

APPROVED

DEC 1 1972

BY

TITLE

SUPERVISOR DISTRICT I

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 tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable 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 such change of condition.

Separate Forms OCS-104 must be filed for each pool in multiple completed wells.

RECEIVED

NOV 5 1972

OIL CONSERVATION COMM.
HOBBES, N. M.

* NAME OF AUTHORIZED TRANSPORTER OF OIL:

Shell Pipe Line Corporation
Mobil Pipe Line Company
Amoco Pipeline Company

Box 1910, Midland, Texas 79701
Box 900, Dallas, Texas
P. O. Box 1979, Tulsa, Oklahoma

RECEIVED

JUN 5 1972

OIL CONSERVATION COMM.
HOUSTON, TEXAS