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U.\$.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		

## NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

Form C-104 Supersedes Old C-104 and C-110

	U.S.G.S.  LAND OFFICE  TRANSPORTER  GAS	AUTHORIZATION TO TRA	AND NSPORT OIL AND	NATURAL GA	Effective 1-1-6:		
1.	OPERATOR PRORATION OFFICE Operator					· <del></del> 1	
Mobil Producing Texas & New Mexico Inc.							
	9 Greenway Plaza, Suite 2700, Houston, TX 77046						
	Reason(s) for filing (Check proper box)		Other (Pleas	• •			
	New Well  Recompletion  Change in Ownership		OII Dry Gas Corporation.				
	If change of ownership give name and address of previous owner		· · · · · · · · · · · · · · · · ·	<del></del>		<del></del>	
11.	II. DESCRIPTION OF WELL AND LEASE						
	Legae Name Denton North Well No. Pool Name, Including Formation Kind of Legae						
	Wolfcamp Unit Tract # 6   15   Denton Wolfcamp  Location  Unit Letter J : 1980   Feet From The South Line and 2180   Feet From The East						
	Line of Section 26 Tow	mship 14-S Range	37-E , NMPN	ı. Lea		County	
	3.10			<del>"</del>			
ın.	DESIGNATION OF TRANSPORT	CER OF OIL AND NATURAL GA	S Address (Give address	to which approve	ed copy of this form is to	be sent)	
	See attachment Name of Authorized Transporter of Cas Tipperary Resources Cor	Address (Give address to which approved copy of this form is to be sent) 500 West Illinois, Midland, TX 79701					
	If well produces oil or liquids, give location of tanks.	Is gas actually connected? When  No - temporarily abandoned					
If this production is commingled with that from any other lease or pool, give comming IV. COMPLETION DATA  Oil Weil Gas Well New Well				Deepen Deepen	Plug Back Same Res	v. Diff. Resav.	
	Designate Type of Completio		<u> </u>				
	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			
		TUBING, CASING, AND	CEMENTING RECO	RD			
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT		
			ļ				
v	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a	fter recovery of total vol	ume of load oil a	and must be equal to or e	xceed top allow-	
• •	/. TEST DATA AND REQUEST FOR ALLOWABLE OII, WELL    Date First New Oil Run To Tanks   Date of Test						
	Date & Itel Men Off Man 10 1 amp						
	Length of Teet	Tubing Pressure	Casing Pressure Water-Bbis.		Choke Size		
	Actual Prod. During Test Cil-Bbis. Water-Bbis.						
	GAS WELL						
	Actual Prod. Test-MCF/D	Length of Teet	Bbis. Condensate/MMG		Gravity of Condensate Choke Size		
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in )	•				
VI.	CERTIFICATE OF COMPLIAN		OIL APPROVED	CONSERVA	TION COMMISSIO	N 19	
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.		BY Orig. Signed by					
	h , m		TITLE Dist 1, Supv.				
			This form is to be filed in compliance with RULE 1104.				
	Deely Neigh			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 Agent (Title)			tests taken on the	tests taken on the well in accordance with NULE 111.			
			able on new and	able on new and recompleted wells.			
			Fill out only Sections I, II. III, and VI for Change of condition. well name or number, or transporter, or other such change of condition. Separate Forms C-104 must be filed for each pool in multiply				

## NAME OF AUTHORIZED TRANSPORTER OF OIL:

Shell Pipe Line Corporation Mobil Pipe Line Company Amoco Pipeline Company Box 2648, Houston Texas 77001 Box 900, Dallas Texas 75221 2300 Continental Natl. Bank Bldg., Fort Worth, Texas 76102