, U. LUPIES RECT	LIVEO	1	
DISTRIBUTION			
SANTA FE		<u> </u>	
FILE			
u.s.g.s.		<u>i                                     </u>	L
LAND OFFICE			
TRANSPORTER	OIL	<u> </u>	
	GAS	<u> </u>	<u> </u>
OPERATOR			<u> </u>
			I

## EW MEXICO OIL CONSERVATION COMMISSIO

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

- 1	SANTA FE		OR ALLOWABLE	Effective 1-1-65		
- 1	FILE	-	AND SPORT OIL AND NATURAL GA'	· ·		
- 1	U.S.G.S.	AUTHORIZATION TO TRANS	SPORT OIL AND NATORAL GA	•		
	IRANSPORTER OIL					
	GAS					
	OPERATOR					
1.	PRORATION OFFICE Operator					
Mobil Oil Corporation						
	P. O. Box 633, Midland	, Texas 79701				
	Reason(s) for filing (Check proper box)		Other (Please explain)			
	New We!1	Change in Transporter of: Oil Dry Gas				
	Recompletion Change in Ownership	Casinghead Gas X Condensa	ate 🗍			
	If change of ownership give name					
	and address of previous owner					
1.	DESCRIPTION OF WELL AND L	Keil No. Pool Name, Including For	mation Kind of Lease	Lease No.		
	Lgentum North Wolfcamp Unit Tr. 13	4 <u>Denton Wolfcamp</u>	State, Federal o	Fee Fee		
	Location					
	Unit Letter : 17	80 Feet From The South Line	and 000 Feet From Th	e		
	Line of Section 27 Tow	nship 14-S Range	37-E , ммрм, Lea	County		
II.	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GAS	Address (Give address to which approve	d conv of this form is to be sent!		
	Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which approve	a copy of this form to to be com,		
	* See Attachment Name of Authorized Transporter of Cas	inghead Gas X or Dry Gas	Address (Give address to which approve	d copy of this form is to be sent)		
	Tipperary Resources Co	vnoration	500 West Illinois, Midla	ind, Texas 79701		
	If well produces oil or liquids,	Unit Sec. Twp. P.ge.	Is gas actually connected? When	1, 1970		
	give location of tanks.	J 26 14-S 37-E		1, 1570		
	If this production is commingled wit	h that from any other lease or pool, g	rive commingling order number:			
V.	COMPLETION DATA	0	New Well Workover Deepen	Plug Back   Same Res'v. Diff. Res'v.		
	Designate Type of Completio	1	Total Depth	P.B.T.D.		
	Date Spudded	Date Compl. Ready to Prod.		Tubing Depth		
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay			
	Perforations		Depth Casing Shoe			
	TUBING, CASING, AND CEMENTING RECORD					
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
v	V. TEST DATA AND REQUEST FOR ALLOWABLE  (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)					
•	OIL WELL					
	Date First New Oil Run To Tanks	Date of Test				
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas-MCF		
	GAS WELL	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate		
	Actual Prod. Test-MCF/D	Length of 1991				
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size		
VI. CERTIFICATE OF COMPLIANCE		QIL CONSERVA	TION COMMISSION			
•			APPROVED JUN 2 1971 . 19			
	I hereby certify that the rules and regulations of the Oil Conservation		10 Mares			
I hereby certify that the fules and regulations of the commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		DUPERVISOR DISTINCT				
			TITLE			
	$\int \int \mathbf{M} \mathbf{n} \mathbf{k} \cdot \mathbf{n} = \mathbf{n} \cdot \mathbf{n}$		This form is to be filed in compliance with RULE 1104.			
* A IIVa/mul		If this is a request for allowable for a newly drilled or deepened will, this form must be accompanied by a tabulation of the deviation well, this form must be accompanied by a tabulation of the deviation				
	Authorized Agent		I ALUE AN THE WALL IN ECCURATION WASHINGTON			
			All sections of this form must be filled out completely for allow able on new and recompleted wells.			
(Title) May 15, 1970		Fill out only Sections I. II. III, and VI for changes of condition				

(Date)

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 C-104 must be filed for each pool in multiply completed walls.

RECEIVED

JUN 18 1970

OIL CONSERVATION COMM. HOBBS, N. IA.

## \* 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