COPIES REC						
DISTRIBUT	<u> </u>					
SANTA FE						
FILE						
U.S.G.S.						
LAND OFFICE						
IRANSPORTER	OIL					
IMANSPORTER	GAS					
OPERATOR						
PRORATION OFFICE						
Operator						
Mobil Oil	Corpo	ration				
Address						
	622	Midlan	c			
P. O. Box Reason(s) for filing						

## EW MEXICO OIL CONSERVATION COMMISSI REQUEST FOR ALLOWABLE

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

37

	FILE U.S.G.S. LAND OFFICE		AND NSPORT OIL AND NATURAL G	Effective 1-1-65		
	IRANSPORTER GAS					
	OPERATOR PRORATION OFFICE					
I.	Operator Mobil Oil Corporation	<u>,</u>				
	Address	T 70701				
P. O. Box 633, Midland, Texas 79701  Reason(s) for filing (Check proper box)  Other (Please explain)						
	New Well	Change in Transporter of: Oil Dry Gas	. 🗂			
	Recompletion  Change in Ownership	Casinghead Gas X Conden	77			
	If change of ownership give name and address of previous owner					
11.	DESCRIPTION OF WELL AND L	EASE   Well No.   Pool Name, Including Fo	ormation Kind of Lease	Lease No.		
	Leggen ton North Wolfcamp Unit Tr. 6	26 Denton Wolfcan		100		
	Unit Letter J : 1980   Feet From The South   Line and 2180   Feet From The East					
	Line of Section 35 Town	nship 14-S Range	37-E , ммрм, Lea	County		
m.	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GA	S Address (Give address to which appro	ved copy of this form is to be sent)		
	* See Attachment					
	Name of Authorized Transporter of Casinghead Gas X or Dry Gas Tipperary Resources Corporation		Address (Give address to which approved copy of this form is to be sent) 500 West Illinois, Midland, Texas 79701			
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. P.ge.  J 26 14-S 37-E	Yes Ma	ay 1, 1970		
If this production is commingled with that from any other lease or pool, give commingling order number:				!		
IV.	Designate Type of Completion	n - (X)	New Well Workover Deepen	Plug Back   Same Res'v. Diff. Res'v.		
	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	CENENTING DECORD			
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
V.	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a pale for this de	fter recovery of total volume of load oil pth or be for full 24 hours)	and must be equal to or exceed top allow-		
	OIL WELL  Date First New Oil Run To Tanks  Date of Test  Producing Method (Flow, pump, gas lift, etc.)					
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
	Actual Prod. During Test	Oil-Bbis.	Water - Bbls.	Gas-MCF		
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate		
		Tubing Pressure (Shut-in )	Casing Pressure (Shut-in)	Choke Size		
	Testing Method (pitot, back pr.)	I doing Pressure (State-III)				
VI.	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.  Author  (Signature)  Zed Agent  (Title)  May 15, 1970			ATION COMMISSION  N-2-9/1971 19		
			TITLE SUPERVISOR DISTRICT  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 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 C-104 must be filed for each pool in multiply completed wells.			

RECEIVED

JUN 18 1970

OIL CONSERVATION COMM. HOBBS, 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