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LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-11  
Effective 1-1-85

I. Operator  
Mobil Producing TX. & N.M. Inc.  
Address  
Nine Greenway Plaza, Suite 2700, Houston, Texas 77046  
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 Wolfcamp Unit - Tract 7	Well No. 8	Pool Name, Including Formation Denton Wolfcamp	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Unit Letter <u>F</u> ; <u>1980</u> Feet From The <u>North</u> Line and <u>1650</u> Feet From The <u>West</u> Line of Section <u>36</u> Township <u>14S</u> Range <u>37E</u> , NMPM, <u>Lea</u> 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 Corp. 500 West Illinois, Midland, TX 79701					
If well produces oil or liquids, give location of tanks.	Unit J	Sec. 26	Twp. 14S	Rge. 37E	Is gas actually connected? Yes	When 4-23-82

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 Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded 4-11-82	Date Compl. Ready to Prod. 4-23-82	Total Depth 12640	P.B.T.D. 9600					
Elevations (DF, RKB, RT, GR, etc.) 3801' GL; 3816' DF	Name of Producing Formation Wolfcamp	Top Oil/Gas Pay 9212	Tubing Depth 9590					
Perforations Wolfcamp 9212-9450						Depth Casing Shoe		
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
13-3/8	36#		314		ORIGINAL CSG.			
9-5/8	40# & 36#		4778		UNDISTURBED			
7	23#, 26#, 29#, & 32#		12640					

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 4-24-82	Date of Test 5-6-82	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 Hrs.	Tubing Pressure ---	Casing Pressure ---	Choke Size ---
Actual Prod. During Test 338 (Bbl)	Oil-Bbls. 31	Water-Bbls. 19	Gas-MCF 15

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.

Paula A. Collins  
(Signature)  
Authorized Agent  
(Title)  
May 18, 1982  
(Date)

OIL CONSERVATION COMMISSION

APPROVED JUN 1 1982, 19  
ORIGINAL SIGNATURE  
BY JERRY  
TITLE 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 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 C-104 must be filed for each pool in multiply

RECEIVED

MAY 21 1982

REC.  
HOBBS CLERK

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