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TRANSPORTER	OIL		
	GAS		
OPERATOR			
BROOK TION OFFICE		1	T

	DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE IRANSPORTER OIL GAS OPERATOR		ONSERVATION COMMISSION FOR ALLOWABLE AND NSPORT OIL AND NATURA	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65 AL GAS			
1.	PRORATION OFFICE Operator						
	Mobil Producing Texas & New Mexico Inc.						
	Reason(s) for filing (Check proper box) New Well Recompletion Change in Ownership	Change in Transporter of: Oil Dry Gas Casinghead Gas Conden:	Other (Please explain) To change Op Corporation.	erator name from Mobil Oil ive Date: 1-1-1980)			
	If change of ownership give name and address of previous owner						
11.	DESCRIPTION OF WELL AND I	Well No. Pool Name, Including Fo		Lease No.			
	Nora Berry	l Hobbs Brayburg	buil march	100			
	Unit Letter K; 125	O Feet From The West Line	and 2196 Feet \vec{r}	rom The South			
	Line of Section 31 Tow	vnship 18 Range	38 , ммрм,	Lea County			
III.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	S				
	Name of Authorized Transporter of Oil Shell Pipe Line Cor	!	Box 2648 Houston	pproved copy of this form is to be sent) TX 77001			
	Name of Authorized Transporter of Casinghead Gas 🔀 or Dry Gas 🗔		Address (Give address to which approved copy of this form is to be sent)				
	Phillips Petroleum Co If well produces oil or liquids,	Unit Sec. Twp. Rgs.	Frank Phillips Bldg Bartlesville OK 74004 Is gas actually connected? When				
	give location of tanks. SW/4 31 18-S 38-E Yes Ye						
	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deeper				
	Designate Type of Completio	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.			
	Date Spudded						
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth			
	Perforations	erforations		Depth Casing Shoe			
	TUBING, CASING, AND		CEMENTING RECORD				
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			
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)						
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, g	as lift, etc.)			
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size			
	Actual Prod. During Test	Cil-Bbis.	Water - Bble.	Gas-MCF			
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate			
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size			
VI.	CERTIFICATE OF COMPLIANCE	CE	V	RVATION COMMISSION			
	I hereby certify that the rules and regulations of the Oil Conservation		APPROVED DE	3 1979			
	Commission have been complied to	with and that the information given sees tof my knowledge and belief.		Orig. Signed by Jerry Sexton			
			TITLE Dist 1 Supe				

VI.

Beckey Newjahr
(YSignature)
Authorized Agent
(Title)
0 1 01 1070

<u>October</u> (Date)

APPROVED	DEC 3 19/9 19	
BY	Orig. Signed by	
ə T	Jerry Sexton	
TITLE	Dist 1, Supe	
	-	

This form is to be filed in compliance with RULE 1104.

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.

Secretal Forms Collid must be filled for each need in multiply

Separate Forms C-104 must be filed for each pool in multiply