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U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR		<u> </u>	
PRORATION OFFICE			
Operator		•	
Amini Oil	Cor	pora	itio
Address		-	

(Title)

(Date)

April 2, 1971

NEW MEXICO OIL CONSERVATION COMMISSION Form C+104 REQUEST FOR ALLOWABLE Supersedes Old C-104 and C-110 Effective 1-1-65 AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS 400 Wall Towers West Midland, Texas 79701 Reason(s) for filing (Check proper box) Other (Please explain) New Well Recompletion Dry Gas Change in Ownership Casinghead Gas Condensate [If change of ownership give name the larger of the larger larger and address of previous II. DESCRIPTION OF WELL AND LEASE e.. No. (Undesignated) matton Kind of Lease Lease No. Vacuum Abo, North R-4137 Marathon-State 2 State, Federal or Fee State B 2244 Location 1980 Feet From The North Line and 1780 Unit Letter _ Feet From The _ West 12 Township 17-S 34-E County III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| Name of Authorized Transporter of Oil | | Or Condensate | | Address (Give address to which approved copy of this form is to be sent) Mobil Oil Corporation Box 633, Midland, Texas 79701

Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Casinghead Gas 🔀 Phillips Petroleum Corp. Bartlesville, Oklahoma squad actually connected? When 74003 If well produces oil or liquids, 12 give location of tanks. 17-S 34-E No As Soon As Possible If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Oi: Well Gas Wei. New Well Workover Deepen Plug Back Same Res'v. Diff. Res'v. Designate Type of Completion - (X) Date Compl. Ready to Prod. Total Depth 2-15-71 3-12-71 86751 Elevations (DF, RKB, RT, GR, etc., Name of Producing Formation Top Cil/Gas Pay Tubing Depth 85451 4026 <u>G</u>L Vacuum Abo, North Perforations Depth Casing Snoe 8545' - 8596' (15 holes) 8675 TUBING, CASING, AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT 12 - 1/48-5/8" 1708 1300 sacks 7-7/8" 6" 8605' 1700 sacks 2-3/8 tubing <u>8580'</u> 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) Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tank <u>3-2</u>9-71 Pumping 2'x1-1/4'x16'x20 Sargent RHBC Casing Pressure Choke Size 3-31-71 Length of Test Tubing Pressure 24hrs. 30= <u> 30=</u> Actual Proa. During Test Oil - Bbis. Water - Bbis. Gas - MCF 115 -0-175 GAS WELL Actual Prod. Test-MCF/D Length of Test Bbls. Concensate/MMCF Gravity of Condensate Testing Method (pitot, back pr.) Tubing Pressure (Shut-in) Cosing Pressure (Shut-in) Choke Size VI. CERTIFICATE OF COMPLIANCE OIL CONSERVATION COMMISSION APPROVED 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 SUPERVISOR DISTINCT . This form is to be filed in compliance with AULE 1104. attor If this is a request for allowable for a newly drilled or despende well, this form must be accompanied by a tabulation of the deviation tauts taken on the well in accordance with RULE 111. (Signature) Agent

All sections of this form must be illed 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. Saparate Forms CatOd must be Stad for each goal in multiply

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