

DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
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-110
Effective 1-1-65

Operator Mobil Oil Corporation	
Address Box 633, Midland, Texas 79701	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Bridges State	Well No. 165	Pool Name, Including Formation Vacuum Middle Penn	Kind of Lease State, Federal or Fee State	Lease No. B-1520
Location				
Unit Letter D ; 660 Feet From The North Line and 850 Feet From The West				
Line of Section 13 Township 17-S Range 34-E , NMPM, Lea 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"/> MOBIL PIPE LINE COMPANY	Address (Give address to which approved copy of this form is to be sent) Box 900, Dallas, Texas	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> PHILLIPS PETROLEUM COMPANY	Address (Give address to which approved copy of this form is to be sent) Box 2130, Hobbs, New Mexico 88240	
If well produces oil or liquids, give location of tanks.	Unit A	Sec. 14
	Twp. 17-S	Rge. 34-E
	Is gas actually connected? Yes	When 6-6-71

If this production is commingled with that from any other lease or pool, give commingling order number:

362

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 4-17-71	Date Compl. Ready to Prod. 6-6-71		Total Depth 10,600		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.) 4035 GR	Name of Producing Formation Vacuum Middle Penn		Top Oil/Gas Pay 10,393		Tubing Depth 10,395			
Perforations 10,393, 394, 395, 396, 397, 398, 399, 10,400, 405, 406, 407, 408, 409, 410, 414, 415, 416, 418, 419, 420, 423, 424, 425, 426, & 10,427		Depth Casing Shoe -						
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/2	13-3/8		360		400 x			
12-1/4	9-5/8		5,000		2,900 x			
8-3/4	7"		6,300		1,400 x			

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)

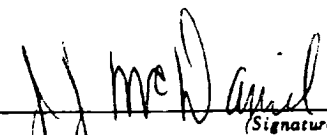
Date First New Oil Run To Tanks 6-6-71	Date of Test 6-21-71	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24	Tubing Pressure 400#	Casing Pressure Pkr.	Choke Size 20/64"
Actual Prod. During Test 364	Oil - Bbls. 364	Water - Bbls. 1-BAW	Gas - MCF 611.5

GAS WELL

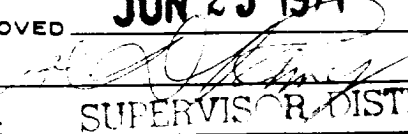
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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.


(Signature)
Authorized Agent
(Title)
6-23-71
(Date)

OIL CONSERVATION COMMISSION

APPROVED **JUN 25 1971**, 19
BY 
TITLE **SUPERVISOR, DISTRICT I**

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 completed wells.

717. 40.

RECEIVED

JUN 2 1967

OIL CONSERVATION BOARD
WASHINGTON, D.C.