DISTRIBUTION RW MEXICO OIL CONSCRIVATION COMMISSION Supersedes O d C-104 and C-110 REQUEST FOR ALL MABLE MANTA FE AHD FILE AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS ົບ.ຈ.ອ.ຣ. LAND OFFICE To become effective August 1, 1973. THANSPORTER GAS GPERATOR PROBATION OFFICE Operator Hobil Oil Corporation Address P. U. Box 633, Midland, Texas 79701 Other (Please explain) Reason(x) for filing (Check proper box) Change of lease name due to unitization. Formerly Lea FE State Well #7. Change in Transporter of: Dry Gas Oil Recompletion Casinghead Gas Condensate Change in Ownership Gulf Oil Corporation, Box 670, Hobbs, New Mexico 88240 If change of ownership give name and address of previous owner ____ H. DESCRIPTION OF VELL AND LEASE | Well No. | Pool Name, Including Formation Lease No. Kind of Lease State, Federal or Fee E-580 State North Vacuum-Abo 214 North Vacuum Abo Unit Location Feet From The North Feet From The West 790' 790 Line and ___ Unit Letter Range 34-E Line of Section]] 17**-**S County Township H. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS | Name of Authorized Transporter of Oil (A) | or Condensate | | | | Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Oil [A] Box 900, Dallas, Texas Attn: Don Mennedy Mobil Pipeline Co. Address (Give address to which approved copy of this form .. to be sent) or Dry Gas Name of Authorized Transporter of Casinghead Gas Kit Room B-2 Phillips Bldg., Odessa, TX Phillips Pet. Co. When P.qu. Is gas actually connected? Twp. Unit If well produces oil or liquids, ; D 17S 34E Yes 11 give location of tanks. If this production is commingled with that from any other lease or pool, give commingling order number: V. COMPLETION DATA Same Res'v. Diff. Res'v. Deepen Plug Back New Veil Workover Gas Well Oil Well Designate Type of Completion - (X) P.B.T.D. Total Dapth Date Compl. Fleady to Prod. Date Spudded Tubing Depth Top Oll/Gas Pay dame of Producing Formation Elevations (DF, RKB, RT, CR, etc.) Depth Casing Shoe Derforations TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT DEPTH SET CASING & TUBING SIZE HOLE SIZE (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)

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tanks Date of Test Choke Size Casing Pressure Tubing Pressure I enoth of Test Gas-MCF Water - Bbls. Oil-Bbis. Actual Prod. During Test

GAS WELL			O the different
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 (Ehut-in)	Choke Size
resumma service (burner, page a beat	•		

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been compiled with and that the information given above is true and complete to the best of my knowledge and belief.

Christine O. Tueler
(Signature)
Travalion Clirk
7-25-73

OIL CONSERVATION COMMISSION

APPROVED __. Orig. Signed by BY___

Joe D. Ramey TITLE __ Dist. J. Supy,

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

If this is a request for ellowable for a newly drilled or despende well, this form must be accompanied by a indulation of tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable or new and recomplate? wells.

F I out only Sections I. II. III, and VI for hanges of owner, well is $\tau \simeq c \tau$ number, or transporter, or other such the tree of condition. Spring Corms C-101 must be filed for any a good in waiting but a development.