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REQUEST FOR ALLOWABLE FILE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS LAMPORTICE IRANSPORTER OIL OFFRATOR Mobil Producing Texas & New Mexico Inc. Address 9 Greenway Plaza, Suite 2700, Houston, TX 77046 Resonci) for filing (forker proper box) New Weil OIL Reconci) for filing (forker proper box) New Weil IRANSPORTER OIL IRANSPORTER OIL OIL Casinghed Gas Condensite OIL Corporation. (Effective Date: 1-1-1980) II. change of ownership give name and address of previous owner II. DESCRIPTION OF WELL AND LEASE Lease No. North Vacuum Abo Unit IT2 North Vacuum—Abo Store, Federal or Fee State North Vacuum Abo Unit IT2 North Vacuum—Abo Store, Federal or Fee State Discover State Lease No. Line of Section 3 Township 17-5 Ronge 34-E, NNFM Lea County III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS N/A — Water Injection Well When It well produces oil or liquids. If this production is commingled with that from any other lease or pool, give commingling order number: IV. completion Data OIL Well OIL OPERATOR OIL Well OIL Well OIL OPERATOR OIL Well OIL Well OIL Well OIL Well OIL Well OIL OPERATOR OIL Well OIL Well OIL Well OIL Well OIL Well OIL OPERATOR OIL Well OIL Well OIL OPERATOR OIL OPERATOR OIL Well OIL OPERATOR OIL OPERATOR OIL OPERATOR OIL OPERATOR OIL OPERATOR OIL OPERATOR OTHER SECTION OTHER SECTION OIL OPERATOR OTHER SECTION OIL OPERATOR OIL OPERATOR OTHER SECTION OTHER SECTION OTHER SECTION OTHER SECTION OIL OPERATOR OTHE	F COPIES RECEIVED	1								
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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) OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date of Test Date First New Oil Run To Tanks Choke Size Casing Pressure Length of Test Tubing Pressure Gas - MCF Water - Bbls. Oil-Bbls. Actual Prod. During Test

GAS WELL			C to d Contracto
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.

Robbin Ja	in	
(Signature)		 1.
Authorized Agent		
(Title)		
October 31, 1979		
 (Date)		

OIL	CONSERV	ATION	N COMMIS	1012
	nation of		79 - I	

APPROVED		17/7	, 19
	Orig	g. Signed by	
BY	Jerr	y Sexton	
TITLE	Dist	1, Supv.	

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 silow-able 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