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TRANSPORTER	OIL	
	GAS	
OPERATOR		
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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-11.  
Effective 1-1-85

Operator Mobil Producing TX & NM Inc.	
Address 9 Greenway Plaza - Suite 2700 - Houston, TX 77046	
Reason(s) for filing (Check proper box)	
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"/>
Other (Please explain)	

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Bridges State	Well No. 501	Pool Name, including Formation Vacuum	Kind of Lease State, Federal or Fee State	Lease No. B-1520
Location				
Unit Letter <u>B</u>	<u>1275</u>	Feet From The <u>E</u> Line and <u>297</u>	Feet From The <u>S</u>	
Line of Section <u>14</u>	Township <u>17S</u>	Range <u>34E</u>	NMPM, <u>Lea</u>	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 Pipeline Co.	Address (Give address to which approved copy of this form is to be sent) Box 900 - Dallas, TX 75221					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum Co. GPM Gas Corporation	Address (Give address to which approved copy of this form is to be sent) Frank Phillips Bldg., Bartlesville, OK 74004					
If well produces oil or liquids, give location of tanks.	Unit NE/4	Sec. 14	Twp. 17S	Range 34E	Is gas actually connected? Yes	When 7-9-85

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded 6-10-85	Date Compl. Ready to Prod. 7-2-85		Total Depth 4800		P.B.T.D. 4754			
Elevations (DF, RKB, RT, GR, etc.) 4050 GL; 4063 KB	Name of Producing Formation San Andres		Top Oil/Gas Pay 4542		Tubing Depth Pkr 4440			
Perforations 4542-4606					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
13-3/8	13-3/8		35		Driven			
12-1/4	8-5/8		1705		1250sx			
7-7/8	5-1/2		4800		1380sx			

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 7-2-85	Date of Test 7-8-85	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hrs.	Tubing Pressure 110	Casing Pressure 700	Choke Size 15/64"
Actual Prod. During Test 66	Oil - Bbls. 12	Water - Bbls. 756	Gas - MCF 6

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate 36.5 @ 60°
Testing Method (pilot, 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.

Nancy Lewis  
(Signature)  
Authorized Agent  
(Title)  
7-15-85  
(Date)

OIL CONSERVATION COMMISSION

APPROVED JUL 23 1985, 19\_\_\_\_  
BY ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT SUPERVISOR  
TITLE \_\_\_\_\_

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