

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

¹ Operator name and Address MOBIL PRODUCING TX & NM INC.* *MOBIL EXPLORATION & PRODUCING US INC. AS AGENT FOR MPTM P.O. BOX 633, MIDLAND, TX 79702		² OGRID Number 015144
		³ Reason for Filing Code CORRECT PROPERTY CODE
⁴ API Number 30-025-29260	⁵ Pool Name VACUUM GRAYBURG SAN ANDRES	⁶ Pool Code 62180
⁷ Property Code 008015	⁸ Property Name BRIDGES STATE	⁹ Well Number 502

II. ¹⁰ Surface Location

UL or lot no. M	Section 13	Township 17-S	Range 34-E	Lot. Idn	Feet from the 284	North/South Line S	Feet from the 1305	East/West line W	County LEA
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¹¹ Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot. Idn	Feet from the	North/South Line	Feet from the	East/West line	County
¹² Lse Code S	¹³ Producing Method Code P	¹⁴ Gas Connection Date	¹⁵ C-129 Permit Number	¹⁶ C-129 Effective Date	¹⁷ C-129 Expiration Date				

III. Oil and Gas Transporters

¹⁸ Transporter OGRID	¹⁹ Transporter Name and Address	²⁰ POD	²¹ O/G	²² POD ULSTR Location and Description
015126	MOBIL PIPELINE CO. P. O. BOX 900 DALLAS, TEXAS 75221	1937010	O	
009171	GPM 4001 PENBROOK ODESSA, TEXAS 79762	1937030	G	

IV. Produced Water

²³ POD	²⁴ POD ULSTR Location and Description
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V. Well Completion Data

²⁵ Spud Date	²⁶ Ready Date	²⁷ TD	²⁸ PBTD	²⁹ Perforations
³⁰ Hole Sie	³¹ Casing & Tubing Size	³² Depth Set	³³ Sacks Cement	

VI. Well Test Data

³⁴ Date New Oil	³⁵ Gas Delivery Date	³⁶ Test Date	³⁷ Test Length	³⁸ Tbg. Pressure	³⁹ Csg. Pressure
⁴⁰ Choke Size	⁴¹ Oil	⁴² Water	⁴³ Gas	⁴⁴ AOF	⁴⁵ Test Method

⁴⁶ I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. Signature: Shirley Houchins		OIL CONSERVATION DIVISION Approved by: [Signature] Title: Approval Date:	
Printed name: SHIRLEY HOUCHINS			
Title: ENVIRONMENTAL & REGULATORY TECHNICIAN			
Date: 06-20-97	Phone: (915) 688-2585		

⁴⁷ If this is a change of operator fill in the OGRID number and name of the previous operator			
Previous Operator Signature	Printed Name	Title	Date