	_		6:	
49. OF COPIES RECE -ED	1			
DISTRIBUTION	_ NEW MEXICO OIL C	NEW MEXICO OIL CONSERVATION COMMISSION Form 0-104		
SANTA FE	REQUEST FOR ALLOWABLE Supersedes ON G-134 and Ellective 1-1-35			Supersedes VII C-IIA and C-, Ellection I = 25
FILE		AND	•	mireditae (-1-3)
U.S.G.S.	_ AUTHORIZATION TO TRA	INSPORT O'L AND NAT	URAL GAS	
LAND OFFICE	<u>.</u>			
TRANSPORTER DIL				
OPERATOR I				
Conses Inc.				
P.O. Box 466), Hobbs, New Mexico 382			
Reason(s) for tiling (Check proper ou		Other i Please exp		
New Well	Change in Transporter of:		corporate na	
Recompletion Change in Cwnership!	Ctt Dry Go Conde	e don't inches of the dompany cried the		
If change of ownership give name and address of previous owner				
DESCRIPTION OF WELL AND	LEASE		a of Lease	
State H-35	10 Vacuum (te, Federal or Fee	B-3196
Unit Letter G	280 Feet From The X	ne and	eet From The <u>E</u>	
	ownship 175 Range	34E , NMPM,	lea	County
	RTER OF OIL AND NATURAL G	AS		
Name of Authorized Transporter of	u 🔀 or Congensate 🗍	Address (Give address to w	hich approved copy o	of this form is to be sent)
Mobil Pipeline	6.	Mid and TX		
	asingneda Gas or Dry Gas	Address (Give address to w	hich approved copy o	of this form is to be sent;
If well produces oil or liquids, give location of tanks.	G 35 11 34	Is gas actually connected?	i When	
	with that from any other lease or pool,	give commingling order nu	mber:	
. COMPLETION DATA	Oil Well Gas Well	New Well Workover	Deepen Plug Bo	ick Same Restri, Diit, Rest
Designate Type of Comple	$x_i = x_i - x_i$;	
Date Spugged	Date Compi. Recay to Proc.	Total Depth	P.B.T.	o.
Date opasses				
Elevations (DF, RKB, RT, GR, etc.	Name of Producing Formation	Top Cil/Gas Pay	Tubing	Cepth
Die verland (Dr.) (NO), No.), Ort, Ere.	,			
Personations			Deptn 3	Tasing Shoe
		D CEMENTING RECORD		ALCKE CENEVE
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT
. TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be	after recovery of total volume	of load oil and must	be equal to or exceed top allo
OIL WELL	ante for this c	lepth or be for full 24 hours) Producing Method (Flow, p		
Date First New Oil Bun To Tanks	Date of Test	Producting Mannod (1 10m) P	, , , , , , , , , , , , , , , , , , ,	
		Casing Pressure	Choke	Size
Length of Test	Tuping Pressure	Cusing Pressure	0	
	CII-Bbie.	Water - Sbis,	Gas-M	iof
Actua, Prod. During Test	CI38.6.			
GAS WELL	/ T	I Bbls. Condensate/MMCF	Gravity	y of Candensate
Actual Prod. Test-MCF/D	Length of Test	2555		
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-i	Choke	Size
I. CERTIFICATE OF COMPLIA	NCE	OIL CO	NSERVATION	COMMISSION
. Chillienth of Com bi.			2	11/2
t banks considerable the inter-	d regulations of the Oil Conservation	APPROVED		19
Commission have been complied	i with and that the information giver	11 1/ ///	V XIII	22
above is true and complete to	BY	- Africa		
	TITLE Distri	ct Superviso	r	
An-1				
AMAN		This form is to b	e filed in complian	nce with RULE 1104,
(14/110)	2 XXX	If this is a reque	at for allowable fo	r a newly drilled or deeper a tabulation of the deviat
	ignature)	well, this form must t	e secompanied by	with RULE 111.
Division Manager v		tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for all		

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 weils.

(Date)

MMOCD (5) FILE

Division Manager (Title)

अनुस्क्रिक्षण्य अनुस्कृतिका

S. 18 33356

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JUN221979
OIL CONSERVATION COMM.
HOBBS, N. M.