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SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OF	FICE	
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• •	SANTA FE FILE U.S.G.S. LAND OFFICE IRANSPORTER GAS	REQUEST	ONSERVATION COMMISSION FOR ALLOWABLE AND INSPORT OIL AND NATURAL O	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65	
1.	OPERATOR PRORATION OFFICE Operator				
	Mobil Producing Texas & New Mexico Inc.				
	9 Greenway Plaza, Suite 2700, Houston, TX 77046 Reason(s) for frling (Check proper box) Other (Please explain)				
	New Well Change in Transporter of: Change in Transporter of: To change Operator name from Mobil Oil				
	Recompletion Change in Ownership	Oil Dry Ga Casinghead Gas Conden	= volpolation.	Date: 1-1-1980)	
	If change of ownership give name and address of previous owner				
11.	DESCRIPTION OF WELL AND L	EASE			
	Bridges State #25	Well No. Pool Name, Including Fo		1,5000 1101	
	Location 66	0		State D-1320	
	Unit Letter D; 860	Feet From The North Lin	e and 860 Feet From	rhe West	
	Line of Section 25 Town	nship 17-S Range	34-Е , ммрм,	Lea County	
Ш.	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GA	Asidsess (Give address to which appro-	and some of the form in the Land	
	Name of Authorized Transporter of Oil Mobil Pipeline Co		Box 900 Dallas, TX 752	21	
	Name of Authorized Transporter of Cast Phillips Petroleum Co	nghead GasXXX or Dry Gas	Frank Phillips Bldg, Ba		
		Unit Sec. Twp. Rge. NE/4 25 17-S 34-E	Is gas actually connected? Who	en.	
	If this production is commingled with	that from any other lease or pool,	give commingling order number:	PC-297	
IV.	COMPLETION DATA	Oli Well Gas Weli	New Well Workover Deepen	Piug Back Same Restv. Diff. Restv.	
	Designate Type of Completion	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	Date Spudded	Date Compt. Heacy to Fred			
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
	Perforations			Depth Casing Shoe	
	TUBING, CASING, AND CEMENTING RECORD				
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
			1		
V.	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 allowable for this depth or be for full 24 hours)				
	OIL WELL Date First New Oil Fun To Tanks	Date of Test	Froducing Method (Flow, pump, gas li	ft, etc.)	
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
	Actual Prod. During Teet	Oil-Bhis.	Water - Bbls.	Gas-MCF	
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate	
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
			OIL CONSERVA	TION COMMISSION	
VI.	CERTIFICATE OF COMPLIANC		APPROVED DEC		
	I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given		Orig. Signed by		
	above is true and complete to the best of my knowledge and belief.		BY Jerry Sexion TITLE Dist 1, Supv.		
				compliance with RULE 1104.	
	Authorized Agent (Title)		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 allow-		
			able on new and recompleted w	able on new and recompleted wells.	
	October 31		well name or number, or transpor	ter, or other such change of condition. t be filed for each pool in multiply	