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	SANTA FE     NEW MEXICO OIL CONSERVATION COMMISSION     Form C-104       FILE     REQUEST FOR ALLOWABLE     Supersedes Old C-104 and Effective 1-1-65       U.S.G.S.     AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
				Supersedes Old C-104 and C-11 Effective 1-1-65
			GAS	
	LAND OFFICE			
	TRANSPORTER GAS	-		
I.	OPERATOR PRORATION OFFICE	-		
	Mobil Producing Texas & New Mexico Inc.			
	Address			
	9 Greenway Plaza, Suite 2700, Houston, TX 77046			
	Reason(s) for filing (Check proper box)       New Well   Change in Transporter of:		Other (Please explain)	· · · · · · · · · · · · · · · · · · ·
	Recompletion		□ To change Oper □ Corporation.	ator name from Mobil Oil
	Change in Ownership	Casinghead Gas Conde		e Date: 1-1-1980)
	If change of ownership give name	······································		
	and address of previous owner	······		
П.	DESCRIPTION OF WELL AND	Well No. Pool Name, Including F	ormation Kind of Lea	30
	Bridges State 🚛	114 Vacuum G		Lease No.
	Location			000000 10 1920
	Unit Letter K ; 18	80 Feet From The South Lin	ne and <u>1880</u> Feet From	TheWest
	Line of Section 24 To			
	Line of Section 24 To	wnship <u>17-S</u> Range	<u>34-е</u> , ммрм,	Lea County
Ш.	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	NS	
	Name of Authorized Transporter of Oil X or Condensate Address (Give address to which approved copy of this form is to be sent) Mobil Pipeline Co Box 900 Dallas TX 75221			
	MODIL Pipeline Co Name of Authorized Transporter of Casinghead Gas Xx or Dry Gas EFFECTIVE: February which represed copy of this form is to be sent)			
	EFFECTIVE: February 1, 1992			
	If well produces oil or liquids, Unit Sec. Twp. Ege. Is gas actually connected? When			
	give location of tanks.	B 26 17-S 34-E	Yes	9-23-1966
IV.	If this production is commingled window COMPLETION DATA	th that from any other lease or pool,		PLC-37
	Designate Type of Completi	on - (X)	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.
	Date Spudded	Date Campl. Ready to Prod.	Total Depth	P.B.T.D.
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
	Perforations		Depth Casing Shoe	
		TUBING, CASING, ANI	D CEMENTING RECORD	
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
	· · · · · · · · · · · · · · · · · · ·			
V.	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a	fter recovery of total volume of load oil	and must be equal to or exceed top allow-
	OIL WELL Date First New Oil Run To Tanks	Date of Test	pth or be for full 24 hours) Producing Method (Flow, pump, gas l	ift, etc.)
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size
	Actual Prod. During Test	Oil-Bbie.	Water - Bbls.	Gas-MCF
	Actual From Burning Foot			
		<u></u>		<u> </u>
	GAS WELL Actual Prod. Test-MCF/D Length of Test Bbis. Condenacte/MMCF Gravity of Condenacte			
	Actual Prod. 1001-MCF/D	Length of iest	Bols. Condensate/MMCF	Gravity of Consensate
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
		<u> </u>	 	
	<b>CERTIFICATE OF COMPLIANCE</b> I hereby certify that the rules and regulations of the Oil Conservation		OIL CONSERVATION COMMISSION	
			APPROVED DEC 19, 19	
	Commission have been complied '	with and that the information given		
	above is true and complete to the best of my knowledge and belief.		Lange Courts South to	
	Robbie Cher			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	
	Authorized Agent		tests taken on the well in acco	rdance with RULE 111.
	(Title)		All sections of this form must be filled out completely for allow- able on new and recompleted wells.	
	October 31, 1979 (Date) Date: D Date: D Date: Date: Date:			I. III, and VI for changes of owner, ter, or other such change of condition.
	(D)	ate)	Il wart statute of statutes i of statute hos	

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