NO. OF COPIES RECE	(IVED	1	
DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OF			

DISTRIBUTION SANTA FE	MEW!	MEXICO OIL (NC /	Form C+104 Supersedes Of	ld C-104 and C-11
FILE			AND			Effective 1-1-	65
U.S.G.S.	AUTHORIZA	TION TO TR	ANSPORT	OIL AND	NATURAL (SAS	
TRANSPORTER OIL							
GAS							
PROPATION OFFICE							
Operator							
Mobil Producing Te	xas & New Mexico	Inc.					
Address 9 Greenway Plaza,	Suita 2700 Houst	- mv 7	7046				
Reason(s) for filing (Check proper		Lon, IA /	7046	Other (Pleas	e explain)	·	
New Well	Change in Transp	orter of:				tor name from	Mohil Oil
Recompletion	Oil	Dry G	as 🔲	Corpor	ation.		
Change in Ownership	Casinghead Gas	Conde	nagte	(Effective	Date: 1-1-19	80)
If change of ownership give name and address of previous owner_	e						
DESCRIPTION OF WELL AN	ND LEASE						
Lease Name	Well No. Pool No				Kind of Lease		Legse No.
North Vacuum Abo Uni	t 129	North Vac	cuum-Ab	0	State, Federa	orFee State	B-1520
	Feet From The	North	ne and 19	80	F	rhe East	
	restrict int		"e and T)	 	reetFrom?	neEast	
Line of Section 23	Township 17-S	Range	34-	-Е , имри	*	Lea	County
DESIGNATION OF TRANSPO	ORTER OF OIL AND A	NATURAL GA	AS				
Name of Authorized Transporter of			Address (Give address	to which approx	ed copy of this form is	o be sent)
Mobil Pipe Line Co	Can		Воз	x 900, Da	llas, TX	7 5221	
Name of Authorized Transporter of	_	Ory Gas				ed copy of this form is	o be sent)
Phillips Petroleum (orporation wp. Rge.	Is gas act	x 2105 Ho	obbs. NM	88240	-
give location of tanks.	A 26 1	7 : 34	Yes	S	<u> </u>	12-1-72	
If this production is commingled	with that from any other	lease or pool,	give comm	ingling order	number:		1.
COMPLETION DATA	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back Same Res	dy Dill Books
Designate Type of Comple	etion - (X)	 	1	i i		i i	,
Date Spudded	Date Compl. Ready to	Prod.	Total Dep	th		P.B.T.D.	
Elevations (DF, RKB, RT, GR, etc.	: Name of Producing For	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth	
, , , , , , , , , , , , , , , , , , , ,	.,		1000000	,,		Labing Deptil	
Perforations	**************************************		•			Depth Casing Shoe	····
	TIDING	CASING AND					
HOLE SIZE	CASING & TUB	, CASING, AND	CEMENT	DEPTH SE		SACKS CEN	ENT
						JACKS CEN	IENI
			 				
TEST DATA AND REQUEST	FOR ALLOWABLE	(Test must be a	fter tecover	v of total nalm	ne of load oil o	ind must be equal to or e	
OIL WELL		able for this de	pth or be fo	r full 24 hours)		xceea top attow-
Date First New Oil Run To Tanks	Date of Test		Producing	Method (Flow	, pump, gas lif	, etc.)	
Length of Test	Tubing Pressure	· · · · · · · · · · · · · · · · · · ·	Casing Pr	●#\$## ●		Choke Size	
Actual Prod. During Test	Oil-Bhis.		Water-Bbl		. , . ,	Gas - MCF	
			1				
GAS WELL							···
Actual Prod. Test-MCF/D	Length of Test	Length of Test		Bbls. Condensate/MMCF		Gravity of Condensate	
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)		Casing Pressure (Shut-in)		Choke Size		
				· · · · · · · · · · · · · · · · · · ·			
CERTIFICATE OF COMPLIA	NCE			OIL	ONSERVA	TION COMMISSION	4
Thereby position that the suiter of	nd remulations of the O'	Concernation	APPRO	VED	DEC	5 1979	19
I hereby certify that the rules and regulations of the Oii Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		Orig. Signad (
above is true and complete to	ing past of my knowledg	e and belief.	1		ecery .	Andread Control	
			TITLE	· · · · · · · · · · · · · · · · · · ·	120 Ju	Syr	
10.11	O.	•** •				ompliance with RULE	
Muli	there they			his is a requ	est for allows	able for a newly drille led by a tabulation o	d or deepened the deviation
Authoriz	enature) V		tests ts	ken on the v	vell in accord	lence with RULE 111	•
	ed Agent Tille)		All able on	sections of new and rec	this form mus completed wel	t be filled out comple is.	tely for allow-
October			Fit	1 out only S	ections I. II.	III. and VI for chan	ges of owner,
(Date)	j	well ner	ne or unmper	, or transporte	r, or other such chang	e or condition.

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