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TRANSPORTER OIL		
TRANSPORTER GAS		
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NEW MEXICO OIL CONSERVATION COMMISSION

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

I.

Operator: Mobil Oil Corporation

Address: Box 633, Midland, Texas

Reason(s) for filing (Check proper box)
New Well [X]
Recompletion [ ]
Change in Ownership [ ]
Change in Transporter of: Oil [ ] Dry Gas [ ] Casinghead Gas [ ] Condensate [ ]
Other (Please explain): THIS WELL HAS BEEN PLACED IN THE POOL DESIGNATED BELOW. IF YOU DO NOT CONCUR NOTIFY THIS OFFICE.

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease State, Federal or Fee	Lease No.
Bridges State	146	~~Undesignated~~ Vacuum Abo, R-4360	State	B-1520

Location: Unit Letter P ; 660 Feet From The South Line and 810 Feet From The East Line of Section 22 Township 17-S Range 34-E, NMPM, Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil [X] or Condensate [ ]: Mobil Pipe Line Company
Address (Give address to which approved copy of this form is to be sent): Box 900, Dallas, Texas

Name of Authorized Transporter of Casinghead Gas [X] or Dry Gas [ ]: Phillips Petroleum Company
Address (Give address to which approved copy of this form is to be sent): Box 2105, Hobbs, N.M.

If well produces oil or liquids, give location of tanks: Unit A Sec. 14 Twp. 17-S Rge. 34-E
Is gas actually connected? Yes When 10-16-70

If this production is commingled with that from any other lease or pool, give commingling order number: PC-362

IV. COMPLETION DATA

Designate Type of Completion – (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
	X		X					

Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
9-22-70	10-19-70	2250	—

Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
4031 Gr.	Vacuum Abo North	8575	2216

Perforations: 8575, 82, 89, 92, 96, 99 & 8606, 09, 14, 17, 19, 34, 8642, 46, 8650, 53, 55, 57, 59
Depth Casing Shoe: —

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4	8 5/8	1620	1000 sx
7 7/8	5 1/2	8750	3100 sx

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 Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
10-16-70	10-25-70	Pumping	
Length of Test	**Tubing Pressure**	**Casing Pressure**	**Choke Size**
24 hrs	—	—	2" Tub
Actual Prod. During Test	**Oil-Bbls.**	**Water-Bbls.**	**Gas-MCF**
37	37	2 BW	33.3

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	**Tubing Pressure (Shut-in)**	**Casing Pressure (Shut-in)**	**Choke Size**

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

J. J. McDaniel
(Signature)
Authorized Agent
(Title)
10-27-70
(Date)

OIL CONSERVATION COMMISSION

APPROVED: [illegible], 19 [illegible]

BY: Joe D. Ramey

TITLE: [illegible]

This form is to be filed in 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 tests taken on the well in accordance with RULE 111.

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 wells.