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IEW MEXICO OIL CONSERVATION COMMISSIC. REQUEST FOR ALLOWABLE AND

Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65 AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS PRORATION OFFICE AZTEC OIL & GAS COMPANY P. O. BOX 837, HOBBS, NEW MEXICO 88240 Reason(s) for filing (Check proper box) Other (Please explain) To show Lease connected to Mobil Pipe New Well Line gathering system 10-12-72 Recompletion Oil Dry Gas Change in Ownership Casinghead Gas Condensate If change of ownership give name and address of previous owner ___ II. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including Formation Kind of Lease Lease No. State WV State, Federal or Fee 3 Morth Vacuum Abo State E-6712 Location 2104 South Line and _ 1856 J East Feet From The Unit Letter Feet From The 28 17-8 34-E Line of Section Township Range , NMPM, Lea County III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Cil Address (Give address to which approved copy of this form is to be sent) P. O. Box 1037, Midland, Texas 79701

Address (Give address to which approved copy of this form is to be sent) MOBIL PIPE LINE COMPANY Name of Authorized Transporter of Casinghead Gas 🕎 or Dry Gas Room 622, Phillips Bldg, Odessa, Texas
Is gas actually connected? When PHILLIPS PETROLEUM COMPANY Unit Twp. Rge. If well produces oil or liquids, give location of tanks. H 28 17 34 Yes 1-22-72 If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Oil Well Gas Well Workover Same Res'v. Diff. Res'v. New Well Plug Back Designate Type of Completion - (X) P.B.T.D. Date Compl. Ready to Prod. Total Depth 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 (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow able for this depth or be for full 24 hours) V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Date First New Oil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.) Casing Pressure Choke Size Length of Test Tubing Pressure Oil-Bbls. Water-Bbls. Gas - MCF Actual Prod. During Test **GAS WELL** Length of Test Actual Prod. Test-MCF/D Bbls. Condensate/MMCF Gravity of Condensate Casing Pressure (Shut-in) Testing Method (pitot, back pr.) Tubing Pressure (Shut-in) Choke Size OIL CONSERVATION COMMISSION VI. CERTIFICATE OF COMPLIANCE APPROVED_ I hereby certify that the rules and regulations of the Oil Conservation Orig. Signed S Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief. BY_ Joe D. Ramey Dist. I, Supv. TITLE. orginial signed by: LESTER L. DUKE 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. (Signature) District Superintendent All sections of this form must be filled out completely for allowable on new and recompleted wells. (Title) 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. October 20, 1972

Separate Forms C-104 must be filed for each pool in multiply completed wells.

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