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| TRANSPORTER | OIL GAS |
| OPERATOR | |
| PRORATION OFFICE | |

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

| | |
|---|--|
| Operator Humble Oil & Refining Company | |
| Address P. O. Box 1600, Midland, Texas 79701 | |
| Reason(s) for filing (Check proper box) New Well <input checked="" type="checkbox"/> Change in Transporter of: Recon. let-in <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Change in ownership <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> | |
| Other (Please explain) CHANGE OPERATOR NAME FROM HUMBLE OIL & REFINING COMPANY TO EXXON CORPORATION EFFECTIVE JANUARY 1, 1973 | |

If change of ownership give name and address of previous owner *Cancel allowable for #214*

II. DESCRIPTION OF WELL AND LEASE

| | | | |
|---|-----------------------|---|--|
| Lease Name New Mexico "K" State | Well No. 33 | Pool Name, including Formation San Andres Vacuum - Grayburg | Kind of Lease State, Federal or Fee State, Federal or Fee |
| Location Unit Letter B ; 990 Feet From The North Line and 2306 Feet From The East Line of Section 32 , Township 17S Range 35E , NMPM, Lea County | | | |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| | | | | | | |
|---|--|-------------------|---------------------|---------------------|--|-------------------------|
| Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Texas New Mexico Pipeline | Address (Give address to which approved copy of this form is to be sent) Box 1510, Midland, Texas 79701 | | | | | |
| Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum Company | Address (Give address to which approved copy of this form is to be sent) 4th & Washington, Odessa, Texas 79760 | | | | | |
| If well produces oil or liquids, give location of tanks. | Unit J | Sec. 32 | Twp. 17-S | Rge. 35-E | Is gas actually connected? Yes | When 12-20-71 |

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

IV. COMPLETION DATA

| | | | |
|--|--|--|--|
| Designate Type of Completion - (X) X | Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> New Well <input type="checkbox"/> Workover <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Same Res'v. <input type="checkbox"/> Diff. Res'v. <input type="checkbox"/> | | |
| Date Spudded 10-25-71 | Date Compl. Ready to Prod. 12-20-71 | Total Depth 4750 | F.S.T.D. 4620 |
| Pool Vacuum Grayburg San Andres | Name of Producing Formation Grayburg - San Andres | Top Oil/Gas Pay 4396 | Tubing Depth 4610 |
| Perforations 4396 - 4620 | | Depth Casing Shoe 4750 | |
| TUBING, CASING, AND CEMENTING RECORD | | | |
| HOLE SIZE 11 7-7/8 | CASING & TUBING SIZE 8-5/8 5-1/2 2-7/8 | DEPTH SET 1600 4750 4610 | SACKS CEMENT 800 280 - |

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(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)

| | | | |
|---|---------------------------------|--|---------------------------|
| Date First New Oil Run To Tanks 11-8-71 | Date of Test 12-20-71 | Producing Method (Flow, pump, gas lift, etc.) Pump | |
| Length of Test 24 | Tubing Pressure Pump | Casing Pressure - | Choke Size Pump |
| Actual Prod. During Test 92 | Oil-Bbls. 83 | Water-Bbls. 9 | Gas-MCF 25 |

GAS WELL

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

R. A. Brand, Jr.
R. A. Brand, Jr.
Unit Head
(Date)
12-21-71
(Date)

DFL:mej

OIL CONSERVATION COMMISSION
DEC 27 1971
APPROVED
BY *[Signature]*
TITLE **SUPERVISOR DISTRICT I**

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 Sections I, II, III, and VI only 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.