

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
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 Mobil Producing Texas & New Mexico Inc.	
Address 9 Greenway Plaza, Suite 2700, Houston, TX 77046	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	To change Operator name from Mobil Oil Corporation. (Effective Date: 1-1-1980)
Recompletion <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	
Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	

If change of ownership give name  
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name North Vacuum Abo East Unit	Well No. 5	Pool Name, Including Formation North Vacuum Abo Pool	Kind of Lease State, Federal or Fee State	Lease No. B-1519
Location Unit Letter B ; 660 Feet From The North Line and 1980 Feet From The East Line of Section 18 Township 17-S Range 35-E , NMPM, Lea County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)			
See Attachment				
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)			
Phillips Petroleum Company	Frank Phillips Bldg, Bartlesville, OK 74004			
If well produces oil or liquids, give location of tanks.	Unit N	Sec. 7	Twp. 17-S	Pge. 35-E
	Is gas actually connected? Yes		When 11-1-78	

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

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded	Date Compl. 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, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT		

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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

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

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.

Rodney Jay  
(Signature)  
Authorized Agent  
(Title)  
October 31, 1979  
(Date)

OIL CONSERVATION COMMISSION

APPROVED DEC 3 1979, 19  
BY Jerry Sexton  
Orig. Signed by  
TITLE Dist. 1, Supv.

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

RECEIVED

NOV - 6 1979

O.C.D. HOBBS, TEXAS

ATTACHMENT

Name of Authorized Transporter of Oil:

Southern Union Rfg., Company (12.5000%)  
1st International Bldg, Suite 1800  
Dallas, Texas 75270

Mobil Pipeline Company (87.5000%)  
Box 900  
Dallas, Texas 75221

RECEIVED

NOV - 6 1979

O.C.D., HOBBS, N.M.

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.B.		
LAND OFFICE		
OPERATOR		

5a. Indicate Type of Lease
State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>

5. State Oil & Gas Lease No.  
B-161

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.  
USE "APPLICATION FOR PERMIT --" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator Mobil Producing TX & NM Inc.	8. Farm or Lease Name North Vacuum Abo East Un
3. Address of Operator 9 Greenway Plaza, Suite 2700, Houston, TX 77046	9. Well No. 5
4. Location of Well UNIT LETTER B 660 FEET FROM THE North LINE AND 1980 FEET FROM THE East LINE, SECTION 18 TOWNSHIP 17-S RANGE 35-E NMPM.	10. Field and Pool, or Wildcat North Vacuum Abo
15. Elevation (Show whether DF, RT, GR, etc.) GL-	12. County Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	
		OTHER convert to injection well <input checked="" type="checkbox"/>	

Abo 8792-8810, TD-8850, PBTD-8821 WJX 551

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

3-5-86 MIRU Diamond WS.  
3-6-86 POH w/RODS & Tbg.  
3-7-86 Perf Abo w/2JSPF @ 8702-05, 8709-16, 8722-24, 8743-44, 8748, 8759-62  
8788-91 (48 holes), acdz w/4000 gal 15% NEFE + 125 RCNBS, displ w/42BFW.  
3-8/9-86 RIH w/perm pkr.  
3-10-86 Set pkr @ 8606, PT 5-1/2 csg 500#-30 MM-OK, witnessed by R.Smith-NMOCD, Hobbs,,  
RD Diamond WS, Turned to production.  
4-1-86 Final Injection Rate: 212 BWPD; TP 510, CP 0

8. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED Nancy Lewis TITLE Authorized Agent DATE 4-7-86  
ORIGINAL SIGNED BY JERRY SEXTON  
APPROVED BY DISTRICT I SUPERVISOR TITLE \_\_\_\_\_ DATE APR 10 1986  
CONDITIONS OF APPROVAL, IF ANY:

RECEIVED  
APR 5 1968  
F.C.D.  
HONORARY DEPT.

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
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 Mobil Oil Corporation		
Address 9 Greenway Plaza, Suite 2700, Houston, TX 77046		
Reason(s) for filing (Check proper box)	Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of:	
Recompletion <input type="checkbox"/>	Oil <input checked="" type="checkbox"/>	Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>
Filed to reflect gatherer of State royalty oil (Southern Union Refining Co.)		

If change of ownership give name and address of previous owner NA

II. DESCRIPTION OF WELL AND LEASE

Lease Name North Vacuum Abo East Unit	Well No. 5	Pool Name, including Formation North Vacuum Abo Pool	Kind of Lease State, Federal or Fee State	Lease No. B-161
Location Unit Letter B ; 660 Feet From The N Line and 1980 Feet From The E				
Line of Section 18 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"/> Southern Union Rfg. Co. (12.5000%) Mobil Pipeline (87.5000%)	Address (Give address to which approved copy of this form is to be sent) 1st Nat'l Bldg. Ste. 1800, Dallas, TX 75270 P. O. Box 900, Dallas, TX 75221 Attn: D.C. Kennedy					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum Pipeline	Address (Give address to which approved copy of this form is to be sent) B-2 Phillips Bldg, Odessa, TX 79760					
If well produces oil or liquids, give location of tanks.	Unit N	Sec. 7	Twp. 17S	Rge. 35E	Is gas actually connected? Yes	When 11-1-78

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

V. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded	Date Compl. 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, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT		

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)

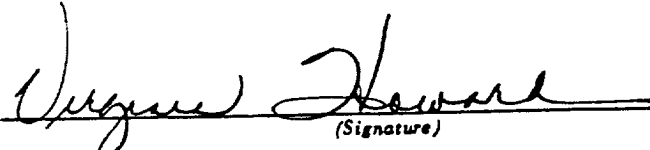
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

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.

  
(Signature)

Authorized Agent  
(Title)

12-6-78  
(Date)

OIL CONSERVATION COMMISSION

APPROVED DEC 11 1978, 19

BY Orig. Signed by  
John Runyan  
Geologist

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