NO. OF COPIES HEC		ī	
DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.		Ī	
LAND OFFICE			
TRANSPORTER	OIL		[
	GAS		
OPERATOR		Ì	
PROBATION OFFICE			

## NEW MEXICO OIL CONSERVATION COMMIS REQUEST FOR ALLOWABLE

Form C-104
Supersedes Old C-104 and C-120

Lease Name		homesty and a second a second and a second a
LAND OFFICE  IRANSPORTER OIL GAS  OPERATOR  PRORATION OFFICE  Operator  Mobil 0il Corporation  Address  Box 633, Midland, Texas 79701  Reson(s) for filing (Check proper box) New Weil Recompletion Oil Change in Transporter of: Recompletion Oil Change in Ownership give name and address of previous owner  If change of ownership give name and address of previous owner  Bridges State  If New Weil Legas Name Bridges State  If New Weil Legas Name  Bridges State  If North Line and  Bridges State  Bridges State	County	Promoter or the second
PRORATION OFFICE	County	Learning and the control of the cont
OPERATOR   OPERATOR   OPERATOR   OPERATOR   OPERATOR	County	Learning to the second
Mobil Oil Corporation	County	Learning on the control of the contr
Operator   Mobil Oil Corporation	County	harmon and the second s
Mobil 0il Corporation  Address  Box 633, Midland, Texas 79701  Reason(s) for filing (Check proper box) New We!!	County	the second secon
Box 633, Midland, Texas 79701  Reason(s) for filing (Check proper box) New Well X Change in Transporter of: Recompletion Oil Dry Gas Condensate  If change of ownership give name and address of previous owner  II. DESCRIPTION OF WELL AND LEASE  Lease Name Bridges State 178 Vacuum State, Federal or Fee State  Location Unit Letter E: 2310 Feet From The North Line and 990 Feet From The West  Line of Section 25 Township 17-S Range 34-E , NMPM, Lea  III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  Name of Authorized Transporter of Oil X or Condensate Box 900 Dallas, Texas  Mobil Pipe Line Name of Authorized Transporter of Casinghead Gas or Ory Gas Address (Give address to which approved copy of this form is Phillips Petroleum Co. Room B-2, Phillips Bldg., Odessa, Township If when It well produces oil or liquids, Unit Sec. Twp. Ege. Is gas actually connected?	County	The state of the s
Box 633, Midland, Texas 79701  Reason(s) for filing (Check proper box) New We!! X Change in Transporter of:  Recompletion Oil Dry Gas Change in Ownership Give name and address of previous owner  II. DESCRIPTION OF WELL AND LEASE Lease Name Bridges State 178 Vacuum  Location Unit Letter E; 2310 Feet From The North Line and 990 Feet From The West Line of Section 25 Township 17-S Range 34-E, NMPM, Lea  III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  Name of Authorized Transporter of Oil X or Condensate Box 900 Dallas, Texas Name of Authorized Transporter of Casinghead Gas X or Dry Gas Address (Give address to which approved copy of this form is Phillips Petroleum Co.  Room B-2, Phillips Bldg., Odessa, To It well produces oil or liquids, Unit Sec. Twp. Eqe. Is gas actually connected? When	County	
Reason(s) for filing (Check proper box)   New We!    X	County	
New We!!	County	
Recompletion	County	
If change of ownership give name and address of previous owner  II. DESCRIPTION OF WELL AND LEASE  Lease Name Bridges State 178 Vacuum State, Federal or Fee State  Location Unit Letter E : 2310 Feet From The North Line and 990 Feet From The West  Line of Section 25 Township 17-S Range 34-E , NMPM, Lea  II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  Name of Authorized Transporter of Oil X or Condensate Box 900 Dallas, Texas  Nome of Authorized Transporter of Casinghead Gas X or Dry Gas Address (Give address to which approved copy of this form is Phillips Petroleum Co.  Room B-2, Phillips Bldg., Odessa, Township Iroduces oil or liquids, Unit Sec. Twp. Ege. Is gas actually connected? When	County	
If change of ownership give name and address of previous owner  II. DESCRIPTION OF WELL AND LEASE    Lease Name	County	
II. DESCRIPTION OF WELL AND LEASE  Lease Name  Bridges State  Location  Unit Letter  E : 2310  Feet From The North  Line and 990  Feet From The West  Line of Section 25  Township 17-S  Range 34-E  Nome of Authorized Transporter of Oil X  Nome of Authorized Transporter of Casinghead Gas X  Or Dry Gas  Phillips Petroleum Co.  If well produces oil or liquids,  Well No. Pool Name, Including Formation  Kind of Lease  State, Federal or Fee State  Line and 990  Feet From The West  Lea  Address (Give address to which approved copy of this form is Box 900 Dallas, Texas  Address (Give address to which approved copy of this form is Phillips Petroleum Co.  Room B-2, Phillips Bldg., Odessa, Ty  If well produces oil or liquids,  When	County	, , , , , , , , , , , , , , , , , , ,
II. DESCRIPTION OF WELL AND LEASE  Lease Name  Bridges State  Location  Unit Letter  E : 2310  Feet From The North  Line and 990  Feet From The West  Line of Section 25  Township 17-S  Range 34-E  Nome of Authorized Transporter of Oil X  Nome of Authorized Transporter of Casinghead Gas X  Or Dry Gas  Phillips Petroleum Co.  If well produces oil or liquids,  Well No. Pool Name, Including Formation  Kind of Lease  State, Federal or Fee State  Line and 990  Feet From The West  Lea  Address (Give address to which approved copy of this form is Box 900 Dallas, Texas  Address (Give address to which approved copy of this form is Phillips Petroleum Co.  Room B-2, Phillips Bldg., Odessa, Ty  If well produces oil or liquids,  When	County	The second secon
II. DESCRIPTION OF WELL AND LEASE  Lease Name Bridges State 178 Vacuum  Unit Letter E: 2310 Feet From The North Line and 990 Feet From The West  Line of Section 178 Vacuum  Unit Letter E: 2310 Feet From The North Feet From The West  Line of Section 178 Vacuum  Feet From The North Feet From The West  Line of Section 178 Vacuum  Feet From The North Feet From The West  Line of Section 18  Address (Give address to which approved copy of this form is Mobil Pipe Line  Name of Authorized Transporter of Casinghead Gas Torms or Dry Gas  Phillips Petroleum Co.  Room B-2, Phillips Bldg., Odessa, Ty If well produces oil or liquids,  Vacuum  State, Federal or Fee State  Name and 990 Feet From The West  Address (Give address to which approved copy of this form is Address (Give address to which approved copy of this form is Phillips Petroleum Co.  Room B-2, Phillips Bldg., Odessa, Ty If well produces oil or liquids,  Value of Name of Produces oil or liquids,  Value of Name of Name of Authorized Transporter of Casinghead Gas Type Rege.  Name of Authorized Transporter of Casinghead Gas Type Rege.  It well produces oil or liquids,  Value of Name of Name of Name of Authorized Transporter of Casinghead Gas Type Rege.  Name of Authorized Transporter of Casinghead Gas Type Rege.  Name of Authorized Transporter of Casinghead Gas Type Rege.  Name of Authorized Transporter of Casinghead Gas Type Rege.  Name of Authorized Transporter of Casinghead Gas Type Rege.  Name of Authorized Transporter of Casinghead Gas Type Rege.  Name of Authorized Transporter of Casinghead Gas Type Rege.  Name of Authorized Transporter of Casinghead Gas Type Rege.  Name of Authorized Transporter of Casinghead Gas Type Rege.  Name of Authorized Transporter of Casinghead Gas Type Rege.  Name of Authorized Transporter of Casinghead Gas Type Rege.  Name of Authorized Transporter of Casinghead Gas Type Rege.	County	
Bridges State 178 Vacuum State, Federal or Fee State  Location  Unit Letter E : 2310 Feet From The North ine and 990 Feet From The West  Line of Section 25 Township 17-S Range 34-E , NMPM, Lea  II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  Name of Authorized Transporter of Oil X or Condendate Box 900 Dallas, Texas  Name of Authorized Transporter of Casinghead Gas X or Dry Gas Address (Give address to which approved copy of this form is Phillips Petroleum Co.  Room B-2, Phillips Bldg., Odessa, Ty If well produces oil or liquids, Unit Sec. Twp. Rge. Is gas actually connected? When	County	The second secon
Bridges State 178 Vacuum State, Federal or Fee State  Location  Unit Letter E : 2310 Feet From The North ine and 990 Feet From The West  Line of Section 25 Township 17-S Range 34-E , NMPM, Lea  II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  Name of Authorized Transporter of Oil X or Condendate Box 900 Dallas, Texas  Name of Authorized Transporter of Casinghead Gas X or Dry Gas Address (Give address to which approved copy of this form is Phillips Petroleum Co.  Room B-2, Phillips Bldg., Odessa, Ty If well produces oil or liquids, Unit Sec. Twp. Rge. Is gas actually connected? When	County	
Unit Letter E : 2310 Feet From The North ine and 990 Feet From The West  Line of Section 25 Township 17-S Range 34-E , NMPM, Lea  II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  Name of Authorized Transporter of Oil X or Condensate Box 900 Dallas, Texas  Name of Authorized Transporter of Casinghead Gas X or Dry Gas Address (Give address to which approved copy of this form is Phillips Petroleum Co.  Room B-2, Phillips Bldg., Odessa, TX if well produces oil or liquids, Unit Sec. Twp. Ege. Is gas actually connected? When	County to be sen:)	4
Unit Letter E : 2310 Feet From The North Line and 990 Feet From The West  Line of Section 25 Township 17-S Range 34-E , NMPM, Lea  II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  Name of Authorized Transporter of Oil X or Condensate Address (Give address to which approved copy of this form is Mobil Pipe Line Box 900 Dallas, Texas  Name of Authorized Transporter of Casinghead Gas X or Dry Gas Address (Give address to which approved copy of this form is Phillips Petroleum Co.  Room B-2, Phillips Bldg., Odessa, TX if well produces oil or liquids, Unit Sec. Twp. Rege. Is gas actually connected? When	to be sent)	1
Line of Section 25 Township 17-S Range 34-E , NMPM, Lea  II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  Name of Authorized Transporter of Oil X or Condensate	to be sent)	
Line of Section 25 Township 17-S Range 34-E , NMPM, Lea  II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  Name of Authorized Transporter of Oil X or Condensate	to be sent)	
II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS    Name of Authorized Transporter of Oil X   or Condensate   Address (Give address to which approved copy of this form is   Mobil Pipe Line   Box 900 Dallas, Texas   Name of Authorized Transporter of Casinghead Gas X   or Dry Gas   Address (Give address to which approved copy of this form is   Phillips Petroleum Co.   Room B-2, Phillips Bldg., Odessa, TX   If well produces oil or liquids,   Unit   Sec.   Twp.   Ege.   Is gas actually connected?   When	to be sent)	_
II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS    Name of Authorized Transporter of Oil X   or Condensate   Address (Give address to which approved copy of this form is   Mobil Pipe Line   Box 900 Dallas, Texas   Name of Authorized Transporter of Casinghead Gas X   or Dry Gas   Address (Give address to which approved copy of this form is   Phillips Petroleum Co.   Room B-2, Phillips Bldg., Odessa, TX   If well produces oil or liquids,   Unit   Sec.   Twp.   Ege.   Is gas actually connected?   When	to be sent)	ل
Name of Authorized Transporter of Oil X or Condensate Address (Give address to which approved copy of this form is  Mobil Pipe Line Box 900 Dallas, Texas  Name of Authorized Transporter of Casinghead Gas X or Dry Gas Address (Give address to which approved copy of this form is  Phillips Petroleum Co. Room B-2, Phillips Bldg., Odessa, TX  If well produces oil or liquids, Unit Sec. Twp. Rge. Is gas actually connected? When		
Name of Authorized Transporter of Oil X or Condensate Address (Give address to which approved copy of this form is  Mobil Pipe Line Box 900 Dallas, Texas  Name of Authorized Transporter of Casinghead Gas X or Dry Gas Address (Give address to which approved copy of this form is  Phillips Petroleum Co. Room B-2, Phillips Bldg., Odessa, TX  If well produces oil or liquids, Unit Sec. Twp. Rge. Is gas actually connected? When		
Mobil Pipe Line  Name of Authorized Transporter of Casinghead Gas X or Dry Gas Address (Give address to which approved copy of this form is  Phillips Petroleum Co.  Room B-2, Phillips Bldg., Odessa, TX  If well produces oil or liquids,  Unit Sec. Twp. Rge. Is gas actually connected?  When		-
Name of Authorized Transporter of Casinghead Gas X or Dry Gas Address (Give address to which approved copy of this form is  Phillips Petroleum Co.  Room B-2, Phillips Bldg., Odessa, TX  If well produces oil or liquids,  Unit Sec. Twp. Eqe. Is gas actually connected?  When		,
Phillips Petroleum Co.  Room B-2, Phillips Bldg., Odessa, TX  If well produces oil or liquids,  Unit   Sec.   Twp.   Eqe.   Is gas actually connected?   When	to be sent)	-
If well produces oil or liquids, Unit Sec. Twp. Rge. Is gas actually connected? When	•	
If well produces oil or liquids,	. 79760	~
give location of tanks. G 25 1/ 34 YES 2-2-74		i
	r	! نـ
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)	estv. Diff. Restv.	
A A		
Date Spudded Date Compl. Ready to Prod. Total Depth P.B.T.D.	4	
12-21-73 2-2-74 4850 Elevations (DF, RKB, RT, GR, etc., Name of Producing Formation Top Oil/Gas Pay Tubing Depth		-
		-
4015 GR San Andres 4745	·	!
Perforations 4686, 88,90,92,94,4700,01,02,06,07,08,18,19,27,29,31,33,35,37, Depth Casing Shoe		í
39, & 4741 w/1 JSPF, Total 21 holes		-
TUBING, CASING, AND CEMENTING RECORD		_
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CE	MENT	
13-3/4 10-3/4 405 450 sx		
8-3/4 7 4850 1600 sx		
		_
		_
V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to of	aread top allow	•
OIL WELL able 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.)	exceed top diton	_
	exteen top unon	-
2-4-74	excess top unor	-
2-4-74 2-19-74 Pump  Length of Test Tubing Pressure Casing Pressure Choke Size	exceed top dison	-
	excee 10p unou	I
Length of Test Tubing Pressure Casing Pressure Choke Size	excee top discu	I wrom I won
Length of Test  Z4  Actual Prod. During Test  Oil-Bbls.  Casing Pressure  Casing Pressure  Choke Size  Water-Bbls.  Gas-MCF	extens top discu	Learning Landson Landson
Length of Test  Z4  Actual Prod. During Test  Oil-Bbls.  Casing Pressure  Casing Pressure  Choke Size  Water-Bbls.  Gas-MCF	exceed top disor	Louisian I wrom I was
Length of Test  24  Actual Prod. During Test  53  Casing Pressure  Casing Pressure  Choke Size  Choke Size  117  Choke Size  117  Page 1	exceed top discu	Louisian I women I was
Length of Test  Z4  Actual Prod. During Test  Oil-Bbls.  Casing Pressure  Casing Pressure  Choke Size  Water-Bbls.  Gas-MCF		I was I was I was I was I
Length of Test         Tubing Pressure         Casing Pressure         Choke Size           24         Actual Prod. During Test         Oil-Bbls.         Water-Bbls.         Gas-MCF           53         117         93.8		Louisian Louisian Lancasca Lancasca
Length of Test  24  Actual Prod. During Test  Oil-Bbls.  53  Under-Bbls.  Gas-MCF  93.8  GAS WELL  Actual Prod. Test-MCF/D  Length of Test  Dilength of Test		Language I was a second of the
Length of Test  24  Actual Prod. During Test  Oil-Bbls.  53  Under Bbls.  Gas-MCF  53  117  GAS WELL  Actual Prod. Test-MCF/D  Length of Test  Dilength of Test  Dilength of Test  Dilength of Test  Dilength of Test  Choke Size  Choke Size  Choke Size  Choke Size  Choke Size		I was I was I was I was I was I was I
Length of Test  24  Actual Prod. During Test  Oil-Bbls.  53  117  GAS WELL  Actual Prod. Test-MCF/D  Length of Test  Dils. Condensate/MMCF  Gravity of Condensate  Testing Method (pitot, back pr.)  Tubing Pressure  Choke Size  Choke Size  Choke Size  Choke Size  Choke Size	<b>\</b>	I was I was I was I was I
Length of Test  24  Actual Prod. During Test  Oil-Bbls.  53  117  GAS WELL  Actual Prod. Test-MCF/D  Length of Test  Dils. Condensate/MMCF  Gravity of Condensate  Testing Method (pitot, back pr.)  Tubing Pressure  Choke Size  Choke Size  Choke Size  Choke Size  Choke Size	<b>\</b>	
Length of Test  24  Actual Prod. During Test  53  Clasing Pressure  Choke Size  Fig. 117  Gas-MCF  93.8  GAS WELL  Actual Prod. Test-MCF/D  Length of Test  Sbls. Condensate/MMCF  Gravity of Condensate  Testing Method (pitot, back pr.)  Tubing Pressure (shut-in)  Casing Pressure (shut-in)  Choke Size  Choke Size  Choke Size  Choke Size  Choke Size	on NC	I was
Length of Test  24  Actual Prod. During Test  53  Casing Pressure  Choke Size  Gas-MCF  93.8  GAS WELL  Actual Prod. Test-MCF/D  Length of Test  Sbls. Condensate/MMCF  Gravity of Condensate  Testing Method (pitot, back pr.)  Tubing Pressure (Shut-in)  Casing Pressure (Shut-in)  Choke Size	<b>\</b>	The second of th
Length of Test  24  Actual Prod. During Test  Oil-Bbls.  53  Water-Bbls.  Gas-MCF  93.8  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  Choke Size  Oil Conservation  Commission have been complied with and that the information given	on NC	The state of the s
Length of Test  24  Actual Prod. During Test  Oil-Bbls.  53  117  Gas-MCF  93.8  GAS WELL  Actual Prod. Test-MCF/D  Length of Test  Dilay Pressure  Splis. Condensate/MMCF  Gravity of Condensate  Testing Method (pitot, back pr.)  Tubing Pressure (Shut-in)  Casing Pressure (Shut-in)  Casing Pressure (Shut-in)  Choke Size  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.	on NC	The second control of
Length of Test  24  Actual Prod. During Test  Oil-Bbls.  53  Water-Bbls.  Gas-MCF  93.8  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  Choke Size  Oil Conservation  Commission have been complied with and that the information given	on NC	The state of the s
Length of Test  24  Actual Prod. During Test  Cil-Bbls.  53  CAS WELL  Actual Prod. Test-MCF/D  Length of Test  Tubing Pressure  Casing Pressure  Choke Size	ON , 19	The second secon
Length of Test  24  Actual Prod. During Test  Cil-Bbls.  53  CAS WELL  Actual Prod. Test-MCF/D  Length of Test  Tubing Pressure  Casing Pressure  Choke Size	ON , 19	The state of the s
Length of Test  24  Actual Prod. During Test  Oil-Bbls.  53  Water-Bbls.  Gas-MCF  117  93.8  GAS WELL  Actual Prod. Test-MCF/D  Length of Test  Sbls. Condensate/MMCF  Gravity of Condensate  Testing Method (pitot, back pr.)  Tubing Pressure (shut-in)  Casing Pressure (shut-in)  Casing Pressure (shut-in)  Choke Size  OIL CONSERVATION COMMISSide  Approved  Approved  Title  This form is to be filed in compliance with Rull  If this form must be accompanied by a tabulation	DN , 19  E 1104.  Itled or despended of the deviation	The same of the sa
Length of Test  24  Actual Prod. During Test  Cil-Bbls.  Coll-Bbls.  Coll-Bbls.  Coll-Bbls.  Conseq Pressure  Choke Size  Choke Size  Choke Size  Choke Size  Conseq Pressure  Comparison  Conseq Pressure  Conseq	DN , 19	1
Length of Test  24  Actual Prod. During Test  Coll-Bbls.  53  CAS WELL  Actual Prod. Test-MCF/D  Length of Test  Sbls. Condensate/MMCF  Gravity of Condensate  Testing Method (pitot, back pr.)  Tubing Pressure (Shut-in)  Casing Pressure  Sbls. Condensate/MMCF  Gravity of Condensate  Condensate/MMCF  Gravity of Condensate  Condensate/MMCF  Condensate/MMCF  Gravity of Condensate  Condensate/MMCF  Condensate/MMCF  Gravity of Condensate  Condensate/MMCF  Gravity of Condensate  Condensate/MMCF  Condensate/MMCF  Gravity of Condensate  Choke Size	DN , 19	1
Length of Test  24  Actual Prod. During Test  53  Casing Pressure  Choke Size	DN , 19 LE 1104. Illed or despended of the deviation 11. Dietely for allowed	1
Length of Test  24  Actual Prod. During Test  Cil-Bbls.  53  Casing Pressure  Choke Size  Casing Pressure  Choke Size  Gas-MCF  93.8  GAS WELL  Actual Prod. Test-MCF/D  Length of Test  Actual Prod. Test-MCF/D  Length of Test  Casing Pressure  Splis. Condensate/MMCF  Gravity of Condensate  Commission Method (pitot, back pr.)  Tubing Pressure(Shut-in)  Casing Pressure  Splis. Condensate/MMCF  Gravity of Condensate  Choke Size  OIL CONSERVATION COMMISSION  APPROVED  This form is to be filled in compliance with RUI  If this is a request for allowable for a newly driven as the condensate of the Conservation of the Conservation of the Conservation of the Conservation and that the information given above is true and complete to the best of my knowledge and belief.  TITLE  This form is to be filled in compliance with RUI  If this is a request for allowable for a newly driven as the condensate of the Conservation	E 1104. Ited or despended of the deviation 11. Dietely for alloweringe of condition.	