Ĩ	NO. OF COPIES RECEIVED DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE TRANSPORTER OIL GAS OPERATOR PROBATION OFFICE	REQUEST	TONSERVATION COMME THE FOR ALLOWABLE AND ANSPORT OIL AND NATURAL	Form C-104 Supersedes Old C-104 and C-110 Ellective 1-1-65 GAS	
1.	Operator Mobil Oil Corporation				
	Address				
	P. O. Box 633, Midla Reason(s) for filing (Check proper bo	-	Other (Please explain)		
	New We!I	Change in Transporter of:			
	Recompletion Change in Ownership	Oil Dry Go Casinghead Gas Conde			
	If change of ownership give name and address of previous owner				
II.	DESCRIPTION OF WELL AND				
	Bridges State	Well No. Pool Name, Including F 181 Vac. G - SA		al or Fee State B-1520	
	Location		I	······································	
	Unit Letter U; 17	97 Feet From The South Li	ne and <u>1650</u> Feet From	The East	
	Line of Section 27 To	winship 17-S Range	34-Е , ммрм, Lea	County	
III.		TER OF OIL AND NATURAL GA		1	
	Name of Authorized Transporter of Cl Mobil Pipe Line Comp	anv	Address (Give address to which appro 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) Room B-2, Phillips Bldg., Odessa, Texas 79760		
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected?		
	give location of tanks.	F 26 17-S 34-E		3-15-74	
	If this production is commingled w COMPLETION DATA	ith that from any other lease or pool,		1	
	Designate Type of Completi	on - (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.	
	2-16-74 Elevations (DF, RKB, RT, GR, etc.)	3-15-74 Name of Producing Formation	4750 Top Oil/Gas Pay	Tubing Depth	
	4039 GR	San Andres		4711 Depth Casing Shoe	
	4615; 16; 17; 20; 21; 22; 23; 24; 28; 29; 30; 45; 46 & 4647 w/2 JSPF - 28 holes				
	TUBING, CASING, AND CEMENTING RECORD				
	HOLE SIZE	CASING & TUBING SIZE	352	400	
	8-3/4	7	4750	1600	
			<u>.</u>		
	TEST DATA AND REQUEST F				
	Date First New Oil Run To Tanks 3-15-74	Date of Test 3-25-74	Producing Method (Flow, pump, gas li Pump	fi, etc.)	
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
	24 Actual Prod. During Test	Oil-Bbis.	Water - Bbla.	Gas • MCF	
		20	53	39.5	
	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 COMPLIAN	ERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
	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. Muchane O. Jucker (Signature) Proration Clerk (Ticle)		APPROVED, 19 BY TITLE 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 scoompanied by a tabulation of the deviation texts taken on the well in =coordance with RULE 111. All sections of this form must be filled out completely for allow-		
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-					
	3-25-74	(12)	sple on new end recompleted wells. Fill out only Sections 7. II. III. and VI for changes of owner, well name or number, or transporten or other such change of condition. Secarate Forms C-104 must be filed for each pool in multiply		