

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.
Effective 1-1-65

I. Operator
Mobil Oil Corporation
Address
Box 633, Midland, Texas 79701
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name State UU Com	Well No. 1	Pool Name, Including Formation Undersignated	Kind of Lease State, Federal or Fee State	Lease No. L5391
Location Unit Letter F : 1907 Feet From The West Line and 1980 Feet From The North Line of Section 7 Township 17-S Range 35-E , NMFM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Mobil Oil Corporation (Trucks)	Address (Give address to which approved copy of this form is to be sent) Box 633, Midland, Texas 79701					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit F	Sec. 7	Twp. 17-S	Rge. 35-E	Is gas actually connected? No	When Waiting on Gas Contract

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)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		X	X					
Date Spudded 3-1-74	Date Compl. Ready to Prod. 7-29-74		Total Depth 12160			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.) 4009.5 GR	Name of Producing Formation Morrow		Top Oil/Gas Pay 11802			Tubing Depth 11750		
Perforations 11802, 06, 10, 13, 18, 23, 28, 35, 39, 44, 49, 53, 58, 67, 75, 79, 83, 88, 93, 11897						Depth Casing Shoe 12152		
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT		
17-1/2	13-3/8		340			400-X		
12-1/2	9-5/8		5000			3700-X		
8-1/2	5-1/2		12152			1950-X		

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 1019.2	Length of Test 4 hrs.	Bbls. Condensate/MMCF 2.4	Gravity of Condensate 51.9
Testing Method (pilot, back pr.) back pr.	Tubing Pressure (Shut-in) 4700	Casing Pressure (Shut-in) 1050	Choke Size varied

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.

Christine C. Tucker
(Signature)
Authorized Agent
(Title)
9-26-74
(Date)

OIL CONSERVATION COMMISSION

APPROVED SEP 26 1974, 19
BY Jerry Taylor
TITLE DISTRICT MANAGER

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 multiple.