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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

I. Operator
Mobil Producing TX. & N.M. Inc.
Address
9 Greenway Plaza, Suite 2700, Houston, Texas 77046
Reason(s) for filing (Check proper box) Other (Please explain)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE
Lease Name North Vacuum Abo Unit Well No. 232 Pool Name, including Formation North Vacuum Abo Kind of Lease State, Federal or Fee State Lease No. B-1520
Location
Unit Letter A 519 Feet From The North Line and 560 Feet From The East
Line of Section 25 Township 17S Range 34E, N.M.P.M., Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil ☒ or Condensate ☐ Address (Give address to which approved copy of this form is to be sent)
Mobil Pipeline Co. P. O. Box 900, Dallas, Texas 75221
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐ Address (Give address to which approved copy of this form is to be sent)
Phillips Petroleum Company P. O. Box 2105, Hobbs, New Mexico 88240
If well produces oil or liquids, give location of tanks. Unit A Sec. 25 Twp. 17S Rge. 34E Is gas actually connected? Yes When 12-24-81

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 Resrv. ☐ Diff. Resrv. ☐
Date Spudded 9-30-81 Date Compl. Ready to Prod. 12-21-81 Total Depth 8750 F.B.T.D. 8705
Elevations (DF, RKB, RT, GR, etc.) 4010' GR Name of Producing Formation Abo Top Oil/Gas Pay 8553 Tubing Depth 8610
Perforations 8553-8590 Depth Casing Shoe
TUBING, CASING, AND CEMENTING RECORD
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT
17-1/2 13-3/8 415 500
12-1/4 8-5/8 5000 3200
12-1/4 & 7-7/8 5-1/2 (Liner) 8749 700

V. TEST DATA AND REQUEST FOR ALLOWABLE (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 12-24-81 Date of Test 1-3-82 Producing Method Flow, pump, gas lift, etc.) Pump 2" x 1 1/2" x 20'
Length of Test 24 Hours Tubing Pressure - Casing Pressure 0 Choke Size 2"
Actual Prod. During Test 640 Oil-Bbls. 95 Water-Bbls. 36 Gas-MCF 179

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

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.

Sammy A. Mize
(Signature)

Authorized Agent

(Title)

1-15-82

(Date)

OIL CONSERVATION COMMISSION

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 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 allowables 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.