

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

I. Operator
Mobil Producing TX. & N.M. Inc.
Address
9 Greenway Plaza, Suite 2700, Houston, Texas 77046
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)
Request 1000 bbl. testing allowable be granted for month of December, 1981. (Battery #204)

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.
Location Unit Letter <u>A</u> ; <u>519</u> Feet From The <u>North</u> Line and <u>560</u> Feet From The <u>East</u> Line of Section <u>25</u> Township <u>17S</u> Range <u>34E</u> , NMPM, <u>Lea</u> 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"/> Mobil Pipeline Co.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 900, Dallas, Texas 75221				
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> None	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 A	Sec. 25	Twp. 17S	Rge. 34E	Is gas actually connected? When No

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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 9-30-81	Date Compl. Ready to Prod. 12-21-81	Total Depth 8750		P.B.T.D. 8705				
Elevations (DF, RKB, RT, GR, etc.) 4010' GR	Name of Producing Formation Abo		Top Oil/Gas Pay		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 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.

A. K. Woods

(Signature)

Authorized Agent

(Title)

12-31-81

(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 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

INCLINATION REPORT

OPERATOR Mobil Producing Texas and New Mexico, Inc. ADDRESS P. O. Box 633, Midland, TX 79702
LEASE North Vacuum Abo Unit WELL NO. 232 FIELD _____
LOCATION Section 25, T-17-S, R-34-E, Lea County, New Mexico

DEPTH	INCLINATION DEGREE	DISPLACEMENT	DISPLACEMENT ACCUMULATED
415	1/2	3.61	3.61
900	1/4	2.13	5.74
1400	3/4	6.55	12.29
1800	1/2	3.48	15.77
2096	1/4	1.30	17.07
2589	1/2	4.29	21.36
3100	1-1/2	13.39	34.75
3270	1/2	1.48	36.23
3488	1/2	1.90	38.13
3643	1	2.71	40.84
3855	1-3/4	6.47	47.31
4295	1/4	1.94	49.25
4627	1/2	2.89	52.14
4741	3/4	1.49	53.63
5000	1/2	2.25	55.88
5475	3/4	6.22	62.10
6000	1-1/4	11.45	73.55
7250	1-1/2	32.75	106.30
7485	1-1/2	6.16	112.46
7820	1-3/4	10.22	122.68
8220	1-3/4	12.20	134.88
8408	1-1/2	4.93	139.81
8750 TD	1-1/2	8.96	148.77

I hereby certify that the above data as set forth is true and correct to the best of my knowledge and belief.

Cactus Drilling Corporation

By: R. Q. McWilliams
Title: R. Q. McWilliams Drlg. Supt.

Affidavit:

Before me, the undersigned authority, appeared R. Q. McWilliams known to me to be the person whose name is subscribed herebelow, who on making deposition, under oath states that he is acting for and in behalf of the operator of the well identified above, and that to the best of his knowledge and belief such well was not intentionally deviated from the true vertical whatsoever.

R. Q. McWilliams
Affiant's signature

Sworn and subscribed to in my presence on this the 15 day of December 19 81.

Notary Public for State of Texas

Larry R. Virgin

My Commission Expires:

April 30, 1985