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-
Effective 1-1-65

I.

Operator
Mobil Producing TX. & N.M. Inc.

Address
Nine Greenway Plaza, Suite 2700, Houston, Texas 77046

Reason(s) for filing *(Check proper box)*
New Well [X]
Recompletion [ ]
Change in Ownership [ ]

Change in Transporter of:
Oil [ ] Dry Gas [ ]
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	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
North Vacuum Abo Unit	237	Vacuum Abo, North	State, Federal or Fee State	B-1520

Location
Unit Letter A : 530 Feet From The North Line and 660 Feet From The East

Line of Section 26 Township 17S Range 34E , NMPM, Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil [XX] or Condensate [ ]	Address *(Give address to which approved copy of this form is to be sent)*
Mobil Pipe Line Company	P. O. Box 900, Dallas, Texas 75221
Name of Authorized Transporter of Casinghead Gas [XX] 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, NM 88240

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	G	24	17	34	Yes	12/25/83

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	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
10/22/83	12/24/83	8700	8645
Elevations *(DF, RKB, RT, GR, etc.)*	**Name of Producing Formation**	**Top Oil/Gas Pay**	**Tubing Depth**
4017 GR	Abo	8425	8623
Perforations			**Depth Casing Shoe**
8425-8584 Abo			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2	13-3/8	405	400
12-1/4	8-5/8	4918	3825
7-7/8	5-1/2	8699	1200
	2-3/8	8623	

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)

OIL WELL

Date First New Oil Run To Tanks	Date of Test	Producing Method *(Flow, pump, gas lift, etc.)*	
12/24/83	12/29/83	Pump	
Length of Test	**Tubing Pressure**	**Casing Pressure**	**Choke Size**
24 hours			
Actual Prod. During Test	**Oil-Bbls.**	**Water-Bbls.**	**Gas-MCF**
952 Bbls.	178	91	139

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.

Paula A. Collins
(Signature)
Authorized Agent
(Title)
01/30/84
(Date)

OIL CONSERVATION COMMISSION

APPROVED FEB 2 1984, 19

BY ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

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

FIELD North Vacuum Abo COUNTY Lea, NM OCC NUMBER

OPERATOR Mobil Producing TX & NM, Inc. ADDRESS Nine Greenway Plaza, Suite 2700
Houston, Texas 77046

WELL NAME AND NUMBER North Vacuum Abo Unit #237

SURVEY 660' FNL & 660' FEL, Section 26, T-17-S, R-34-E

RECORD OF INCLINATION

DEPTH (FEET)	ANGLE OF INCLINATION (DEGREES)
405	1
900	1
1485	3/4
1960	3/4
2500	3/4
3037	3/4
3354	1/2
3852	1/2
4325	1
4676	1
5000	1
5496	1
6000	1
6500	1
6987	3/4
7417	1 1/4
8000	1
8500	1
8700	1 1/4

Certification of personal knowledge inclination data:

I hereby certify that I have personally assembled the data and facts placed on this form, and such information given above is true and complete to the best of my knowledge.

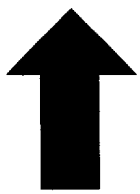
HONDO DRILLING COMPANY

BY:
Walter Frederickson
Vice President

Sworn and subscribed to before me the undersigned authority, on this the

25th day of November, 1983.

Margaret B. Anderson Notary Public in and for Midland County, Texas.
Margaret B. Anderson



LTR

Job separation sheet

No. of Copies Received		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
OPERATOR		

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease: State [X] Fee [ ]

5. State Oil & Gas Lease No.: B-1520

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT —" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL [X] GAS WELL [ ] OTHER-

7. Unit Agreement Name: North Vacuum Abo Unit

2. Name of Operator: Mobil Producing TX. & N.M. Inc.

8. Farm or Lease Name:

3. Address of Operator: Nine Greenway Plaza, Suite 2700, Houston, Texas 77046

9. Well No.: 237

4. Location of Well: UNIT LETTER A, 530 FEET FROM THE North LINE AND 660 FEET FROM THE East LINE, SECTION 26 TOWNSHIP 17S RANGE 34E NMPM.

10. Field and Pool, or Wildcat: Vacuum Abo, North

15. Elevation (Show whether DF, RT, GR, etc.): 4017 GR

12. County: Lea

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK [ ]	PLUG AND ABANDON [ ]	REMEDIAL WORK [ ]	ALTERING CASING [ ]
TEMPORARILY ABANDON [ ]		COMMENCE DRILLING OPNS. [ ]	PLUG AND ABANDONMENT [ ]
PULL OR ALTER CASING [ ]	CHANGE PLANS [ ]	CASING TEST AND CEMENT JOB [X]	
OTHER [ ]		OTHER [ ]	
		NEW WELL	

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

11/14/83 Ran 39 jts 5-1/2 17# N80 ST&C = 1616' + 66 jts 5-1/2 15.50# K55 ST&C = 2884' w/15 centlz & BOT Mod Type C LH w/ 6' tieback ext on 4-1/2 DP, set btm of liner @ 8699, FC @ 8655, TOL @ 4182, circ 1 hr, HOWCO cmt 5-1/2 liner w/ 1000x Class H + 4% gel + .4% Halad 4 + 1/4# FC/x + 200x Class H + .4% halad 4 + 1/4# FC/x, PD @ 11 am 11/14/83, estm 94% hole wash out, POH & LDDP & setting tool, WOC 12 hrs, GIH w/ 7-7/8 HTCo DR4 RR bit & DO cmt stringers & cmt from 3200 to 4182 TOL, circ csg to fr wtr & test 8-5/8 csg & 5-1/2 liner top w/ 1500 psi for 30 min/ok, LDDP & DCs, rel Hondo Drlg Co Rig # 10 @ 6 am 11/15/83.

12/06/83 GIH w/ 4-3/4 bit to TOL @ 4182 & test 8-5/8 csg & 5-1/2 liner top w/ 1000 psi/ ok, DO 10' cmt inside 5-1/2 liner & stringers to 4242 & fell thru, ran bit down & tag firm cmt @ 8580 & DO firm cmt to 8645 = PBTD, circ clean & test csg to 1500 psi/ok, displ csg w/ 375 bbl 2% KCl wtr, pull bit to 8611.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED Paula A. Collins TITLE Authorized Agent DATE 12/07/83

APPROVED BY ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR TITLE _____ DATE DEC 13 1983

CONDITIONS OF APPROVAL, IF ANY:

No. of Copies Received		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
OPERATOR		

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease: State [X] Fee [ ]

5. State Oil & Gas Lease No.: B-1520

SUNDRY NOTICES AND REPORTS ON WELLS

DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT —" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL [X] GAS WELL [ ] OTHER-

7. Unit Agreement Name: North Vacuum Abo Unit

2. Name of Operator: Mobil Producing TX. & N.M. Inc.

8. Farm or Lease Name:

3. Address of Operator: Nine Greenway Plaza, Suite 2700, Houston, Texas 77046

9. Well No.: 237

4. Location of Well: UNIT LETTER A, 530 FEET FROM THE North LINE AND 660 FEET FROM THE East LINE, SECTION 26 TOWNSHIP 17S RANGE 34E NMPM.

10. Field and Pool, or Wildcat: Vacuum Abo, North

15. Elevation (Show whether DF, RT, GR, etc.): 4017 GR

12. County: Lea

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK [ ]	PLUG AND ABANDON [ ]	REMEDIAL WORK [ ]	ALTERING CASING [ ]
TEMPORARILY ABANDON [ ]		COMMENCE DRILLING OPNS. [ ]	PLUG AND ABANDONMENT [ ]
PULL OR ALTER CASING [ ]	CHANGE PLANS [ ]	CASING TEST AND CEMENT JOB [X]	
OTHER [ ]		OTHER [ ]	
		NEW WELL	

17. Describe Proposed or Completed Operations (*Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work*) SEE RULE 1103.

11/03/83 Ran HOWCO FS, 1 jt 8-5/8 32# S80 ST&C = 41', HOWCO FC, 13 jts 8-5/8 32# S80 ST&C = 579', 58 jts 32# J55 ST&C = 2486' + 39 jts 8-5/8 32# K55 ST&C = 1808', csg tally show csg on btm @ 4918, FC @ 4875, HOWCO cmt 8-5/8 csg on btm @ 4918 w/ 3625x Class C + 4% gel + 15# salt/x + 5# gilsonite/x + 1/4# FC/x + 200x Class C + 2% CaCl2 + 1/4# FC/x, PD @ 6 PM 11/3/83, cmt circ 160x, set slips & cut off csg & NU BOP, WOC 12 hrs.

11/04/83 Press test 8-5/8 csg 2000/30 min/held ok, drl cmt-FCcmt-FS 4868-4918, drl cmt, DO fill 4918-4938, fell thru, ran bit to btm, drlg form @ 11 am.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED Paula A. Collins TITLE Authorized Agent DATE 11/09/83

APPROVED BY ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR TITLE _____ DATE NOV 15 1983

CONDITIONS OF APPROVAL, IF ANY:

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
OPERATOR		

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease: State [X] Fee [ ]

5. State Oil & Gas Lease No.: B-1520

SUNDRY NOTICES AND REPORTS ON WELLS

DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT —" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL [X] GAS WELL [ ] OTHER-

7. Unit Agreement Name: North Vacuum Abo Unit

2. Name of Operator: Mobil Producing TX. & N.M. Inc.

8. Farm or Lease Name:

3. Address of Operator: Nine Greenway Plaza, Suite 2700, Houston, Texas 77046

9. Well No.: 237

4. Location of Well: UNIT LETTER A, 530 FEET FROM THE North LINE AND 660 FEET FROM THE East LINE, SECTION 26 TOWNSHIP 17S RANGE 34E NMPM.

10. Field and Pool, or Wildcat: Vacuum Abo, North

15. Elevation (Show whether DF, RT, GR, etc.): 4017 GR

12. County: Lea

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:				SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK	[ ]	PLUG AND ABANDON	[ ]	REMEDIAL WORK	[ ]	ALTERING CASING	[ ]
TEMPORARILY ABANDON	[ ]			COMMENCE DRILLING OPNS.	[ ]	PLUG AND ABANDONMENT	[ ]
PULL OR ALTER CASING	[ ]	CHANGE PLANS	[ ]	CASING TEST AND CEMENT JOB	[X]		
OTHER	[ ]			OTHER	[ ]		

NEW WELL

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

10/22/83 Hondo Drlg Co Rig #10 spud 17-1/2 hole @ 7 am 10/22/83, fin 17-1/2 hole @ 405 @ 10:30 am 10/22/83, circ 1/2 hr, POH, ran 5 jts 13-3/8 54.5# S80 ST&C csg = 201' + 5 jts 13-3/8 48# H40 ST&C, ran 6 centl, HOWCO cmt 13-3/8 csg on btm @ 405 w/400x Class C + 2% CaCl2 + 1/4# FC/x, PD @ 2 pm 10/22/83, cmt circ 100x WOC 6 hrs & cut off csg & NU BOP, test BOP & csg to 1000 psi for 30 min/ok, DO 55' cmt in csg & drlg new form @ 12:15 am 10/23/83.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED Paula A. Collins TITLE Authorized Agent DATE 10/27/83

APPROVED BY ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR TITLE DATE OCT 31 1983

CONDITIONS OF APPROVAL, IF ANY: