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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-11
Effective 1-1-85

Operator The Superior Oil Company	
Address Nine Greenway Plaza, Suite 2700, Houston, Texas 77046	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	Form C-104 dated 12/26/84
Recompletion <input type="checkbox"/>	Filed in error. Please cancel.
Change in Ownership <input type="checkbox"/>	
Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
If change of ownership give name and address of previous owner No change in ownership.	

II. DESCRIPTION OF WELL AND LEASE

Lease Name Mescalero Ridge B. Com.	Well No. 1	Pool Name, including Formation Scharb - Bone Spring	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Unit Letter 0 ; 801 Feet From The South Line and 1839 Feet From The East Line of Section 17 Township 19S Range 35E , NMPM, Lea 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"/> Texas-New Mexico Pipeline	Address (Give address to which approved copy of this form is to be sent) P. O. Box 2528, Hobbs, New Mexico 88240		
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum Company	Address (Give address to which approved copy of this form is to be sent) Frank Phillips Bldg., 5-4B. Bartlesville, OK		
Effective Date February 1, 1992	Is gas actually connected? Yes	When 10-26-83	74004
If well produces oil or liquids, give location of tanks. Unit K Sec. 17 Twp. 19S Range 35E			

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.
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, CR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

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/MCF	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.

W.B. Wilson
Mobil Producing TX. & N.M. Inc. as Agent for
The Superior Oil Co.
January 24, 1985

OIL CONSERVATION COMMISSION	
APPROVED FEB 27 1985	
BY ORIGINAL SIGNED BY JERRY SEXTON	
DISTRICT I SUPERVISOR	
TITLE	
This form is to be filed in compliance with RULE 1184.	
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	

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FEB 25 1985

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