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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-11
Effective 1-1-65

I. OPERATOR
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 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: North Vacuum Abo Unit Well No.: 251 Pool Name: Vacuum Abo, North Kind of Lease: State Lease No.: B-1520-1
Location: Unit Letter C, 660 Feet From The North Line and 2110 Feet From The West
Line of Section 24 Township 17S Range 34E, NMPM, Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil or Condensate : Mobil Pipe Line Company Address: P. O. Box 900, Dallas, TX 75221
Name of Authorized Transporter of Casinghead Gas or Dry Gas : Phillips Petroleum Company GPM Gas Corporation Address: P. O. Box 2105, Hobbs, NM 88240
EFFECTIVE: February 1, 1992
If well produces oil or liquids, give location of tanks: Unit C, Sec. 24, Twp. 17S, Rge. 34E Is gas actually connected? Yes When 08/10/84

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 Rest'v.	Diff. Rest'v.
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
07/01/84	08/10/84	8700	8656					
Elevations (DF, RKB, RT, CR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
4022 GR	Abo	8501	8625					
Perforations	8501-8540 Abo						Depth Casing Shoe	

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2	13-3/8	420	400
12-1/4	8-5/8	5000	2300
7-7/8	5-1/2	8699	1100
	2-7/8	8625	

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.)	
08/10/84	08/14/84	pumping	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hours			
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
331 Barrels	166	32	163

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.

Paula A. Collins
(Signature)
Authorized Agent
(Title)
08/17/84
(Date)

OIL CONSERVATION COMMISSION
APPROVED AUG 23 1984, 19
BY Eddie W. Seay
TITLE Oil & Gas Inspector

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

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O.C.B.
MOBILE OFFICE