

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-78  
Format 06-01-83  
Page 1

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PROMOTION OFFICE		

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator  
Mobil Producing Texas & New Mexico, Inc.

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

Reason(s) for filing (Check proper box)  
☒ New Well  
☐ Recompletion  
☐ Change in Ownership  
 Change in Transporter of:  
☐ Oil  
☐ Casinghead Gas  
☐ Dry 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. 298	Pool Name, including Formation North Vacuum ABO	Kind of Lease State, Federal or Fee	Lease No. B-1520-1
Location Unit Letter <u>G</u> ; <u>2050</u> Feet From The <u>north</u> Line and <u>1900</u> Feet From The <u>east</u> Line of Section <u>15</u> Township <u>17-S</u> Range <u>34-E</u> , 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"/> Mobil Pipeline Co.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 900, Dallas, TX 75221
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> <b>EFFECTIVE: February 1, 1992</b> Phillips 66 Natural Gas Co. GPM Gas Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 2105, Hobbs, NM 88240
If well produces oil or liquids, give location of tanks. Unit <u>K</u> Sec. <u>13</u> Twp. <u>17S</u> Rge. <u>34E</u>	Is gas actually connected? <u>Yes</u> When <u>5-28-86</u>

If this production is commingled with that from any other lease or pool, give commingling order number:

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

Domingo Mayar Jr.  
(Signature)  
Authorized Agent  
(Title)  
9-15-86  
(Date)

OIL CONSERVATION DIVISION

APPROVED SEP 18 1986, 19  
BY ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT 1 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 completed wells.

#### IV. COMPLETION DATA

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 4-20-86	Date Compl. Ready to Prod. 5-28-86			Total Depth 8900			P.B.T.D. 8880		
Elevations (DF, RKB, RT, GR, etc.) KB-4059.5	Name of Producing Formation ABO			Top Oil/Gas Pay 8702			Tubing Depth 8835		
Perforations 8702-8751							Depth Casing Shoe		

#### TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2	13-3/8	402	500
12-1/4	9-5/8	5000	2475
7-7/8	5-1/2	8900	1000
	2-3/8	8835	

#### 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 5-28-86	Date of Test 9-9-86	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls. 20	Water - Bbls. 47	Gas - MCF 23

#### GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate 37.5 @ 60°
Testing Method (puol, back pr.)	Tubing Pressure (Shot-In)	Casing Pressure (Shot-In)	Choke Size

SEP 17 1986  
O.C.D.  
HOBBS OFFICE