

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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OPERATOR	GAS
PROMOTION OFFICE	

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

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator: Mobil Producing TX & NM Inc.

Address: 9 Greenway Plaza, Suite 2700, Houston, TX 77046

Reason(s) for filing (Check proper box):

<input type="checkbox"/> New Well	Change in Transporter of:	<input type="checkbox"/> Oil	<input type="checkbox"/> Dry Gas
<input checked="" type="checkbox"/> Recompletion	<input type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Condensate	
<input type="checkbox"/> Change in Ownership			

Other (Please explain): Original completion C-105 for new well filed 11-4-86 with status SI. This filing status producing, added perfs, producing same field and zone. ~~CASINGHEAD GAS MUST NOT BE FLARED AFTER 2-1-87 UNLESS AN EXCEPTION TO R-1070 IS OBTAINED.~~

If change of ownership give name and address of previous owner:

II. DESCRIPTION OF WELL AND LEASE

Lessee Name State "JJ"	Well No. 2	Pool Name, including Formation Vacuum Grayburg SA	Kind of Lease State, Federal or Fee State	Lease No. B-1527-2
Location Unit Letter <u>N</u> : <u>1670</u> Feet From The <u>West</u> Line and <u>340</u> Feet From The <u>South</u> Line of Section <u>7</u> Township <u>17-S</u> Range <u>35E</u> , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

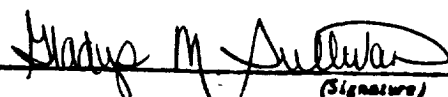
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> JM Petroleum Corporation	Address (Give address to which approved copy of this form is to be sent) 2000 N. Tower, Plaza of the Americas, Dallas, TX 75201
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	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: <u>N</u> Sec: <u>7</u> Twp: <u>17S</u> Rge: <u>35E</u>	Is gas actually connected? <u>NO</u> When:

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.

  
(Signature)

Authorized Agent

(Title)

December 8, 1986

(Date)

OIL CONSERVATION DIVISION

APPROVED DEC 1 2 1986, 19

BY Orig. Signed by Paul Kautz  
Geologist

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			X	
Date Spudded 8-5-86		Date Compl. Ready to Prod. 11-10-86		Total Depth 5000			P.B.T.D. 4954		
Elevations (DF, RKB, RT, GR, etc., KB-4017		Name of Producing Formation San Andres		Top Oil/Gas Pay 4666			Tubing Depth SN @ 4764		
Perforations 4666-4674 (New Perfs), 4724-4736 (Original Perfs)							Depth Casing Shoe -		

#### TUBING, CASING, AND CEMENTING RECORD

MOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4	8-5/8	1710	1100
7-7/8	5-1/2	5000	1225
	2-3/8	SN @ 4764	

#### 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 11-10-86	Date of Test 12-02-86	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hours	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls. 5	Water - Bbls. 8	Gas - MCF 1

#### GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (prior, back pr.)	Tubing Pressure (Shot-in)	Casing Pressure (Shot-in)	Choke Size