

Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

I.

Operator Mobil Producing TX. & N.M. Inc.*	Well API No. 30-025-29834
Address *Mobil Exploration & Producing U.S. Inc. as Agent for Mobil Producing TX. & N.M. Inc. P. O. Box 633, Midland, Texas 79702	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input checked="" type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of operator give name
and address of previous operator

II. DESCRIPTION OF WELL AND LEASE

Lease Name LOVINGTON DEEP AMOCO STATE	Well No. 2	Pool Name, Including Formation SOUTH SHOE BAR UPPER PENN	Kind of Lease State, Federal or Fee STATE	Lease No. B-10639
Location				
Unit Letter L	1830	Feet From The SOUTH	Line and 520	Feet From The WEST
Section 6	Township 17S	Range 36E	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) 205 E. BENDER, HOBBS, NM 88240					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> WARREN PETROLEUM	Address (Give address to which approved copy of this form is to be sent) BOX 1150, MIDLAND, TX 79702					
If well produces oil or liquids, give location of tanks.	Unit A	Sec. 1	Twp. 17S	Rge. 35	Is gas actually connected? YES	When? 4/23/87

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

PLC-75

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well X	Gas Well	New Well	Workover	Deepen	Plug Back X	Same Res'v	Diff Res'v
Date Spudded	Date Compl. Ready to Prod. 11/20/91		Total Depth 12740		P.B.T.D. 10879			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation SO SHOE BAR UPPER PENN		Top Oil/Gas Pay		Tubing Depth			
Perforations 10,646 - 10,798					Depth Casing Shoe			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE 13-3/8	CASING & TUBING SIZE 48		DEPTH SET 450		SACKS CEMENT 500			
9-5/8	36		5150		+2100			
5 1/2	17		12740					

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.)

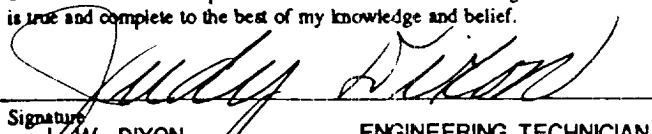
Date First New Oil Run To Tank 11/20/91	Date of Test 11/25/91	Producing Method (Flow, pump, gas lift, etc.) 2 X 1.25 X 34 PUMP	
Length of Test 24	Tubing Pressure	Casing Pressure	Choke Size 1-1/4
Actual Prod. During Test	Oil - Bbls. 140	Water - Bbls. 4	Gas- MCF 0

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. OPERATOR 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 above
is true and complete to the best of my knowledge and belief.

Signature 
J.W. DIXON ENGINEERING TECHNICIAN
Printed Name
Date 11/26/91 Telephone No. (915) 688-2452

OIL CONSERVATION DIVISION

Date Approved

By

Title

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.