: .1	GTATE OF NEW MEXICO HGY AND MINERALS DEPARTMENT		ATION DIVISIC 1 ox 2008	Form C-104 Revised 10-1-78
		SANTA FE, NE	W MEXICO 87501	
		REQUEST FO	DR ALLOWABLE	
	TRANSPONTER OAS AND		AND	
₹.	PROBATION OFFICE		SPORT OIL AND NATURAL GAS	
	Mobil Producing Texas & New Mexico, Inc.			
	Nine Greenway Plaza, Suite 2700, Houston, Texas 77046			
	Reason(s) for filing (Check proper box) (Uther (Please explain)			
	New Well Change in Transporter ol: Effective 1-1-85 Recompletion Ctf Dry Gas			
	Change in Ownership Cavinghead Gas Condensate			
	If change of ownership give name and address of previous owner	Superior Oil Company, Th	e, P. O. Box 3901, Midlan	d, Texas 79702
П .	DESCRIPTION OF WELL AND	LEASE Well No. Pool Name, Including F	Formation Kind of Leas	• Lease No.
	State "A"	2 Eunice-Monum	nent (G-SA) State, Fodera	
	Unit Letter:		ne and Feet From	TheEast
	Line of Section 2.	wnship 20S Range	36Е , _{NMPM} , Lea	County
Ξ.	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Neme of Authorized Transporter of Cill Or Condensate Address (Give address to which approved copy of this form is to be sent) Texas-New Mexico Pipeline P. O. Box 2528, Hobbs, NM 88240			
	Name of Authorized Transporter of Casingneed Gas X or Dry Gas Warren Petroleum Corp.		P. O. Box 67, Monument	ved copy of this form is to be sent; . NM 88264
	If well produces oil or liquids, give location of tanks,	A 2 20S 36E	Is gas actually connected? Wh YES I	en
	f this production is commingled with that from any other lease or pool, give commingling order number:			
	Designate Type of Completion - (X)		New Well Workover Deepen	Plug Back Same Resty, Dill. Resty
	Date Spudded	Date Cample Ready to Prod.	Total Depth	P.B.T.D.
	Elevations (DF, RKB, RT, CR, etc.,	Name of Producing Formation	Tep Oil/Gas Pay	Tubing Depth
	Perforations			Depth Casing Shoe
			D CEMENTING RECORD	<u> </u>
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
	· · · · · · · · · · · · · · · · · · ·			
Į				<u></u>
	TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed to able for this depth or be for full 24 houre) OIL, WFLL able for this depth or be for full 24 houre) Date First New Cil Run To Tanks Date of Test Producing Method (Fiow, pump, gas lift, etc.)			· · · · · · · · · · · · · · · · · · ·
ł	Length of Test	Tubing Pressure	Cosing Pressure	Choke Size
	Actual Prod. During Test	Cil-Bale.	Water-Bbin.	Ga+MCF
l		<u> </u>	<u> </u>	
Г	GAS WELL Actual Prod. Teel-MCF/D	Length of Test	Bbis. Condenecte/AMCF	Crevity of Condeneate
	Testing Wethod (pitol, back pr.)	[Tubing Pressure (Shut-in)	Casing Fransure (Ebat-ib)	Chore Size
			•	
1. (CERTIFICATE OF COMPLIANCE		DIL CONSERVAT	
I	livition have been complied with		APPROVED, 19	
•	above in true and complete to the best of my knowledge and belief.			
	C. R. Sessions		This form is to be filed in c	compliance with FULE 1104.
_	(Signaline) Authorized Agent		well, this form must be accorde.	able for a newly drilled or deepersoned by a tabulation of the deviation
			All exclore of this form must be filled out completely for allow	
(Inte) December 26, 1984			able on new and recordered walls. 1 11 and only fasting i H. III, and M. for charges of conce-	
	(D.	(*)	well name of pumber, or transport	errenders and etary of conditions for the conditions of the file to for each port to conditions.

RECEIVED DEC 31 1984 O.C.D. HOBBS CITICE

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