

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	☐ OIL ☐ GAS
OPERATOR	
PROBATION OFFICE	

Operator Mobil Oil Corporation

Address Box 633, Midland, Texas 79701

Reason(s) for filing (check proper box) Other (please explain)

New Well ☐ Change in Transporter of:

Recompletion ☒ Oil ☐ Dry Gas ☐

Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>L.O. Carson</u>	Well No. <u>9</u>	Loc. Name, including Formation <u>Subh - Gas</u>	Kind of Lease State, Federal or Fee <u>Fee</u>	Lease No.
Location				
Unit Letter <u>E</u>	<u>2051</u> Feet From The <u>North</u> Line and <u>589</u> Feet From The <u>West</u>			
Line of Section <u>33</u>	Township <u>21 S</u>	Range <u>37-E</u>	Co., <u>Lea</u>	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <u>Susan New Mexico Pipe Line Co.</u>	or Condensate ☒	Address (Give address to which approved copy of this form is to be sent) <u>Box 1510, Midland, Texas 79701</u>
Name of Authorized Transporter of Casinghead Gas <u>Northern Natural Gas Co.</u>	or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent) <u>Box 3316, attn: D.O. Butelbaugh, Midland, Tex 79701</u>
If well produces oil or liquids, give location of tanks.	Unit <u>D</u> Sec. <u>33</u> Twp. <u>21 S</u> Rge. <u>37</u>	Is gas actually connected? <u>NO</u>

If this production is commingled with that from any other lease or pool, give commingling order number: R-2079

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas well	New Well	Workover	Deepen	Plug Back	Same Fresh	Diff. Resrv.
		☒		☒		☒		
Date Spudded <u>12-21-72</u>	Date Compl. Ready to Prod. <u>1-2-73</u>	Total Depth <u>8172</u>	P.B.T.D. <u>6280</u>					
Elevation (IDF, RAB, RT, CR, etc.) <u>3469 GR.</u>	Name of Producing Formation <u>Subh</u>	Top Oil/Gas Pay <u>5975</u>	Tubing Depth <u>5120</u>					
Perforations <u>5975, 87, 95, 99, 6004, 12, 35, 46, 45, 50, 60, 67, 72, 6107, 22, 24, 34, 32, 40, 43, 67, 72, 77, 84, 6202, 07, 11, 16, 30, 37, 6246</u>		Depth Casing Shoe <u>5120</u>						
TUBING, CASING, AND CEMENTING RECORD W/1 JSPF								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
	<u>13-3/8</u>	<u>328</u>	<u>200</u>					
	<u>9-5/8</u>	<u>3792</u>	<u>1050</u>					
	<u>7</u>	<u>6220</u>	<u>450</u>					
	<u>5</u>	<u>8172</u>	<u>150</u>					

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.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D <u>478</u>	Length of Test <u>24</u>	Bbls. Condensate/MMCF <u>.0051</u>	Gravity of Condensate <u>45.5</u>
Testing Method (pilot, back pr.) <u>Back Pr.</u>	Tubing Pressure (Shut-in) <u>672-329</u>	Casing Pressure (Shut-in)	Choke Size <u>20/64</u>

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.

Christine O. Tucker
(Signature)

Probation Clerk
(Title)

1-23-73
(Date)

OIL CONSERVATION COMMISSION

APPROVED

FEB 26 1973

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BY

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 data.

Separate Forms C-104 must be filed for each pool in multiple completed wells.