

CONSERVATION	
SECTION	
TYPE	
USDA	
LAND OFFICE	
TRANSPORTATION	☐ OIL ☐ GAS
OPERATOR	
PRODUCTION OFFICE	

NEW SECTION OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND

Form O-184
Supersedes Old O-184 and O-117
Effective 1-1-61

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator Mobil Oil Corporation	
Address Box 633, Midland, Texas 79701	
Reasons for Filing (Check proper box)	Other (Please explain)
New well ☐	Change in Transporter of:
Recapitation ☒	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 Carson Watson Com.	Well No. 13	Pool Name, Including Formation Tubb Gas	Kind of Lease State, Federal or Fee	Lease No. Fee
Location				
Unit Letter G	1909	Feet From The East	Line and 2051	Feet From The North
Line of Section 33	Township 21-S	Range 37-E	MMEN,	Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ Condensate ☐	Address (Give address to which approved copy of this form is to be sent)
None	
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)
Northern Natural Gas Company	P. O. Box 3316, Midland, Texas 79701
If well produces oil or liquids, give location of tanks.	Is gas actually connected? ☒ No

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Restv.	Diff. Restv.
		X				X		X
Date Well W/O Started 11-10-72	Date Compl. Ready to Prod. 12-2-72	Total Depth 7599	P.E.T.D. 6730					
Elevations (DE, RKB, RT, GR, etc.) 3461 Gr.	Name of Producing Formation Tubb Gas	Top Oil/Gas Pay 5960	Tubing Depth 6256					
Perforations 5950-6003, 6015-6033, 6100-6135, 6157-6175, 6187-6230			Depth Casing Shoe 7599					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
17 1/2"	13-3/8	304	300 X					
11"	8-5/8	3810	875 X					
7-5/8"	5 1/2	7599	255 X					

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of lost 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

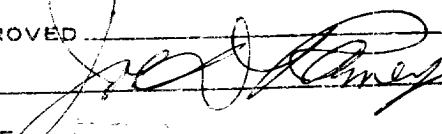
Actual Prod. Test - MCF/D 140	Length of Test 24 hrs.	Bbls. Condensate/MMCF ---	Gravity of Condensate ---
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in) 275	Casing Pressure (Shut-in) Packer	Choke Size 18/64"

VI. 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.


Authorized Agent
2-19-73
(Date)

OIL CONSERVATION COMMISSION

APPROVED  19
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 change of owner, well name or number, or transporter or other such change of condition.

Separate Forms O-184 must be filed for each pool in multiple completed wells.