NEW MEXICO OIL CONSERVATION COMMISSION

Supersedes Old C-104 and C-110
Effective 1-1-65

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

I. Operator

Mobil Oil Corporation

Address

Box 633, Midland, Texas 79701

Reason(s) for filing (Check proper box)

New Well	☐	Change in Transporter of:	
Recompletion	☒	Oil ☐	Dry Gas ☐
Change in Ownership	☐	Casinghead Gas ☐	Condensate ☐

Other (Please explain)

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
E. O. Corson	16	Paddock	State, Federal or Fee Fee	

Location

Unit Letter D : 660 Feet From The North Line and 960 Feet From The West

Line of Section 33 Township 21-S Range 37-E NMPM Lea County

~~EFFECTIVE JANUARY 31, 1977,~~
~~SKELLY OIL COMPANY MERGED~~
~~INTO GETTY OIL COMPANY.~~

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)
Shell Pipe Line Corp.	Box 1009 Hobbs, New Mexico 88240
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)
Skelly Oil Company	Box 730 Hobbs, New Mexico 88240

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	G	33	21	37	Yes	

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 Resv.	Diff. Resv.
	X					X		X

Date Spudded P B	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
9-12-72	9-20-72	8220'	6980'
Elevations (DF, RKB, RT, GR, etc.)	**Name of Producing Formation**	**Top Oil/Gas Pay**	**Tubing Depth**
	Paddock	5150'	5096'
Perforations			**Depth Casing Shoe**
5150-5170, 5200-5215, 5265-5285			–

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/4	13 3/8	298	300
12	9 5/8	2854	1500
8 3/4	7	8220	1100

V. TEST DATA AND REQUEST FOR ALLOWABLE

(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)

OIL WELL

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
9-20-72	9-28-72	Flow	
Length of Test	**Tubing Pressure**	**Casing Pressure**	**Choke Size**
24	340	Packer	20/64
Actual Prod. During Test	**Oil-Bbls.**	**Water-Bbls.**	**Gas-MCF**
	93	163	252.3

GAS WELL

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

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.

C. A. Wells
(Signature)

Authorized Agent
(Title)

October 3, 1972
(Date)

OIL CONSERVATION COMMISSION

APPROVED OCT 5 1972, 19

BY

TITLE SUPERVISOR DISTRICT I

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.