DISTRIBUTION			1
SANTA FE			
FILE			
U.S.G.S.		i	
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			

## NEW MEXICO OIL CONSERVATION COMMIS NEQUEST FOR ALLOWABLE

Form C-104
Supersedes Old C-104 and C-116

	FILE		AND		Effective 1-1-	65		
	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS							
	LAND OFFICE	4						
	TRANSPORTER OIL							
	OPERATOR GAS							
1.	PRORATION OFFICE Operator	<u> </u>			•			
	Mobil Producing Texas & New Mexico Inc.							
	9 Greenway Plaza, Su	ite 2700, Houston, TX 77						
	Keason(s) for filing (Check proper be   New Well	Reason(s) for filing (Check proper box)  Other (Please explain)  To change in Transporter of:						
	Recompletion	Oil Dry Gos Oil Corp			tor mane from 1	Mobil		
	Change in Ownership	Casinghead Gas Conde			ate: 1-1-1980)	)		
	If change of ownership give name and address of previous owner							
11.	DESCRIPTION OF WELL AND							
	Brunson Argo	Well No. Pool Name, Including I	Formation	Kind of Lease State, Federa		Lease No.		
	Location	T Dan Andres	701		ree			
	Unit Letter A ; 5		ne and 731 37	Feet From 1	The North	<del></del>		
	Line of Section 9 T		<b>34</b> -E , NMPI	M, Le	ea	County		
П.	DESIGNATION OF TRANSPOR	RTER OF OIL AND NATURAL GA		to which approx	ved copy of this form is	-		
	N/A Saltwater Dispo	osal Well	risa. soo force accress	to water approx	ved copy of this form is:	io be sent)		
	Name of Authorized Transporter of C	Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent)						
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.	Is gas actually connec	ted? Whe	en			
	If this production is commingled w	ith that from any other lease or pool,	give commingling orde	r number:		•		
	Designate Type of Complet	on + (X) Gas Well	New Well Workover	Deepen	Plug Back   Same Res	o'v. Diff. Res'v.		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	· · · · · · · · · · · · · · · · · · ·	P.B.T.D.	<u> </u>		
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay		Tubing Depth			
	Perforations				Depth Casing Shoe			
-	TUBING, CASING, AND CEMENTING RECORD							
	HOLE SIZE	CASING & TUBING SIZE	DEPTH S		SACKS CEN	4ENT		
					JAGRIC CER	TENT .		
	EST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow able for this depth or be for full 24 hours)							
Ī	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flor	v, pump, gas lif	t, etc.)	<del> </del>		
}	Length of Test	Tubing Pressure	Casing Pressure		Choke Size			
-	Actual Prod, During Test	Oil-Bbls.	Water - Bbls.		Gas - MCF			
			<u> </u>		<u></u>			
_	GAS WELL Actual Prod. Test-MCF/D	Li conth of Tool	I Byla Casterania 0010					
	Actual Prod. 1est-MCF/D	Length of Test	Bbls. Condensate/MMC	r	Gravity of Condensate			
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut	-in)	Choke Size			
ı. (	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.  **ROUGH CALLS TO SIGNATURE OF COMPLIANCE**  (Signature)		OIL CONSERVATION COMMISSION					
			APPROVED <u>DEC 18 1979</u> , 19					
			Orig. Uspand by  Jerry Sexton					
			TITLE Dist I. Supv.					
			This form is to be filed in compliance with RULE 1104.  If this is a request for allowable for a newly drilled or deepene well, this form must be accompanied by a tabulation of the deviatio tests taken on the well in accordance with RULE 111.					
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Authorized Agent			tests taken on the	well in accord	iance with RULE 111	•		
_	October 31 10	All sections of this form must be filled out completely for allow able 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						
-	October 31, 1979 (Date)							
			Separate Form	E C-104 must	be filed for each po	ool in multipl		
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