L		1	
DISTRIBUTION			
SANTA FE			
FILE			
υ.s.g.s.			
LAND OFFICE			
IRANSPORTER	OIL		
THANS ON EN	GAS		
OPERATOR			
200047104 055:05			

SANTA FE	REQUES	T FOR ALLOWABLE	Form C-104 Supersedes Old C-104 and C-1	
FILE		AND	Effective 1-1-65	
U.S.G.\$.	AUTHORIZATION TO TE	RANSPORT OIL AND NATURA	L GAS	
LAND OFFICE	 			
IRANSPORTER GAS				
OPERATOR	 - 			
PROBATION OFFICE				
Operator				
Mobil Producing TX.	& N.M. Inc.			
		77046		
Reason(s) for filing (Check proper	Change in Transporter of:	Other (Please explain)		
Recompletion	Oil Dry C	Gos	t casinghead gas	
Change in Ownership	Castnghead Gas X Cond	densate connection date	e (2/12/80)	
If change of ownership give nam	ie			
and address of previous owner_				
DESCRIPTION OF WELL AT	Well No. Pool Name, Including	Formation Kind of Le	ease Lease No.	
Brunson Argo	16 Paddock	State, Fed	leral or Fee Fee	
Location				
Unit Letter D ;	589 Feet From The North L	tine and 589 Feet Fro	om The West	
Line of Section 10	Township 22-S Range	37-Е , ммрм,	Lea County	
				
	ORTER OF OIL AND NATURAL G	ias		
Name of Authorized Transporter of	_		proved copy of this form is to be sent;	
Shell Pipe Line Comp		P. O. Box 1509, Mid	land, TX 79701 proved copy of this form is to be sent)	
Getty Oil Company		P. O. Box 1137, Euni		
If well produces oil or liquids,	Unit Sec. Twp. Pge.		When	
give location of tanks.	F 10 22-5 37-1	E Yes !	2/12/80	
If this production is commingled	with that from any other lease or pool	, give commingling order number:		
COMPLETION DATA	Oli Well Gaz Well	New Well Workover Deepen	Plug Back Same Resty, Diff, Resty	
Designate Type of Comple	etion – (X)	Wolfover Deepen	Plug Buck Scine Res V. Dill. Res V	
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
Elevations (DF, RKB, RT, GR, etc	Name of Producing Formation	Top Oli/Gas Pay	Tubing Depth	
		i .		
Perforations			Depth Casing Shoe	
	THRING CASING AN	C CEKENTING RECORD		
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
7,022,022				
		<u> i </u>		
	FOR ALLOWABLE (Test must be able for this d	after recovery of total volume of load a lepth or be for full 24 hours)	il and must be equal to or exceed top allow-	
OII, WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	lift, eic.)	
Length of Teet	Tubing Pressure	Cowing Pressure	Choke Size	
Actual Prod. During Test	Oil-Bbis.	Wetter - Bbin.	Gas-MCF	
GAS WELL				
Actual Prod. Test-MCF/D	Length of Test	Bals. Condensate/MMCF	Gravity of Condensats	
Testing Method (pitot, back pr.)	Tubing Pressure (Shnt-in)	Casing Pressure (Shut-in)	Choke Size	
		<u> </u>		
CERTIFICATE OF COMPLIA	NCE	OIL CONSERV	ATION COMMISSION	
		APPROVED	(ATION SOMMISSION	
	d regulations of the Oil Conservation with and that the information given	II APPROVED		
		BY	Orig. Signed by John Runyan	
		TITLE G	eologist	
_		1	•	
Kalda	$\omega \Omega_{\alpha}$	1)	compliance with RULE 1104.	
The word	lature of the same	well, this form must be accomp	owable for a newly drilled or deepened canled by a tabulation of the deviation	
15.0	rized Agent	tests taken on the well in acc	ordance with RULE !!!.	
	112ed Agent 4/8/80	All sections of this form mable on new and recompleted	nust be filled out completely for cliows wells.	
	4/8/80	Fill out only Sections I.	II. III. and VI for changes of cwnor-	
(1	Date)	well name or number, or transpo	rter, or other such change of condition.	
**		Separate Forms C-104 mu	st be filed for each pool in multiply	

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OIL CONSERVATION DIV.

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DISTRIBUTIO			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
IRANSPORTER	OIL		
INANSFORIER	GAS		
OPERATOR			
850045101105			

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104

FILE	REQUES	T FOR ALLOWABLE	Supersedes Old C-104 and C
U.S.G.S.	ALITHODIZATION TO TO	AND	Effective 1-1-65
LAND OFFICE	ADTHORIZATION TO TR	RANSPORT OIL AND NATURAL	GAS
I RANSPORTER OIL			
GAS			
OPERATOR			
PRORATION OFFICE			•
Operator			
	kas & New Mexico Inc.		
Address			
9 Greenway Plaza,		77046	
Reason(s) for filing (Check proper	box)	Other (Please explain)	
New Well	Change in Transporter of:	To change Opera	ator name from Mobil Oi
Recompletion	Oil Dry	Gas Corporation.	
Change in Ownership	Casinghead Gas Cond	ensate (Effective	Date: 1-1-1980)
If change of ownership give nam	•		
and address of previous owner			
DESCRIPTION OF WELL AN	DIEACE		
Lease Name	Well No. Pool Name, Including	Formation Kind of Leas	
Brunson Argo	16 Paddock	State, Federa	Ledse No
Location	10 raddock	State, redero	i or Fee Fee
D 5	89 North	580	110.00
Unit Letter;	Feet From The HOTEII	ine and 589 Feet From	The West
Line of Section 10	Township 22-S Range	37-E NMPM	Lea
Eme of decion	. contains 11 2 Range	37-E , NMPM,	Lea County
. DESIGNATION OF TRANSPO	RTER OF OIL AND NATURAL G	AS	
Name of Authorized Transporter of	Otl or Condensate	Address (Give address to which appro-	ved copy of this form is to be sent)
Shell Pipe Line Com	pany	Box 1509 Midland,	•
Name of Authorized Transporter of		Address (Give address to which appro-	ved copy of this form is to be sent)
Northern Natural Ga	s Company	Box 3316 Midland,	
If well produces oil or liquids,	Unit Sec. Twp. P.ge.	Is gas actually connected? Who	
give location of tanks.	F 10 22-S 37-E	Yes	
If this production is commingled	with that from any other lease or pool	give commingling order purchase	A.
. COMPLETION DATA	with that from any other feade of poor	, give comminging order number:	NA
	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res
Designate Type of Comple	tion - (X)		1 1
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Elevations (DF, RKB, RT, GR, etc.	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Perforations			Depth Casing Shoe
	TUBING, CASING, AN	D CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
·			
<u></u>			1
TEST DATA AND REQUEST		after recovery of total volume of load oil o	and must be equal to or exceed top allo
OIL WELL Date First New Oil Run To Tanks	Date of Test	epth or be for full 24 hours) Producing Method (Flow, pump, gas lif	
Date First New Oli Run 16 I dates	Date of 1981	Producing Method (riow, pump, gas ii)	i, eic.,
I see the set Tree.	Tubia December	C	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbis.	Water - Bble.	Con MCE
Actual From During 1 481	011-3513.	water - Bbis.	Gds-MCF
[<u></u>			L
GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
1000011001101110111011101111011110111101111	Dang St. 1881	Sole: Condensate Minicr	Gravity of Consensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
CERTIFICATE OF COMPLIA	NOE	OU CONSERVA	TION COMMISSION
CERTIFICATE OF COMPLIA	NCE		TION COMMISSION
		APPROVED DEC	3 19/9 19
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.		BY	
		TITLE	
Ω	\sim	This form is to be filed in c	ompliance with RULE 1104.
Doale	/ Newshr	If this is a request for allow	able for a newly drilled or deepens
(54	nature)	well, this form must be accompen tests taken on the well in accord	ied by a tabulation of the deviation
Authorize	d Agent	11	sence with MULE 111. It be filled out completely for allow
	itle)	able on new and recompleted well	ils.
October 3	1, 1979	Fill out only Sections I. II.	III, and VI for changes of owner
(Date)		If well name or number, or transports	er, or other such change of condition

Separate Forms C-104 must be filed for each pool in multiply