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Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

## State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

## OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Azzec, NM 87410 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Operator Well ADI No MOBIL PRODUCING TEXAS & NEW MEXICO INC. 30-025-10179 12450 GREENSPOINT DRIVE Reason(s) for Filing (Check proper box) Other (Please explain) New Well Change in Transporter of: Dry Gas Recompletion Oil Change in Operator Casinghead Gas Condensate change of operator give name d address of previous operator II. DESCRIPTION OF WELL AND LEASE Kind of Lease State, Federal or Fee FEE Lease Name Well No. | Pool Name, Including Formation Lease No. **BRUNSON ARGO** 18 DRINKARD GAS Location , 660 Feet From The NORTH Line and 2080 Unit Letter C Line 225 Range 37E Township LEA , NMPM, County 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)  $\mathbf{X}$ TEXAS NEW MEXICO P/L CO. P.O. BOX 1510, MIDLAND, TX 79702 Name of Authorized Transporter of Casinghead Gas WARREN PETROLEUM CO. Address (Give address to which approved copy of this form is to be sent) or Dry Gas X P.O. BOX 1150, MIDLAND TX 79702 If well produces oil or liquids, give location of tanks. Rge. 37E is gas actually connected? When? 225 10 YES 08/13/72 If this production is commingled with that from any other lease or pool, give commingling order number: PC-163 IV. COMPLETION DATA New Well | Workover Oil Well Gas Well Deepen | Plug Back | Same Res'v Diff Res'v Designate Type of Completion - (X) Total Depth Date Spudded Date Compi. Ready to Prod. P.B.T.D. Elevations (DF, RKB, RT, GR, etc.) Top Oil/Gas Pay Name of Producing Formation **Tubing Depth** Perforations Depth Casing Shoe TUBING, CASING AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE SACKS CEMENT 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 Tank Producing Method (Flow, pump, gas lift, etc.) Date of Test Length of Test Choke Size Casing Pressure Tubing Pressure Actual Prod. During Test Water - Bbls. Oil - Bbls. **GAS WELL** Actual Prod. Test - MCF/D Length of Test Bbis. Condensate/MMCF Gravity of Condensate Testing Method (pitot, back pr.) Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Choke Size VI. OPERATOR CERTIFICATE OF COMPLIANCE OIL CONSERVATION DIVISION I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. FF3 11 1994 Date Approved \_\_\_\_ atricia Paul Kauts Geologist, Swanner Sign nature Patricia B. Swanner Reg.Tech/Asst. III Printed Name Title Title\_ 2/07/94 (713) 775-2081 Date Telephone No.

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.