WS. OF COPIES REC	LIVED	i -	
DISTRIBUTION			
SANTA FE			
FILE			
11.5.G.5.			
LAND OFFICE			
FRANSPORTER	OIL. GAS		
OPERATOR			<u> </u>
PRORATION OFFICE		<u> </u>	1
Operator			
77		~ ~	

4EW MEXICO OIL CONSERVATION COMMIT REQUEST FOR ALLOWABLE

Poim C-104 Supersedes Old C-101 and C-13

	AND O.S.G.S. LAND OFFICE TRANSPORTER OIL. O					
	OPERATOR GAS					
1.	Operator Exxon Corporation	<u></u>				
	Address					
	P. O. Box 1600, Midland, Texas 79701 Recson(s) for filing (Check proper box) Other (Please explain)					
	New Well	Change in Transporter of:				
	Recompletion Change in Ownership	OII Dry Ga: Casinghead Gas Conden	F			
	If change of ownership give name and address of previous owner					
11.	DESCRIPTION OF WELL AND I	LEASE Well No. Pool Name, Including Fo	ormation Kind of Le	ease Lease No.		
	New Mexico "S" State	28 Drinkard	1	eral or Fee State B-934		
	Unit Letter F : 216	O Feet From The North Lin	e and 1800 Feet Fro	om The West		
	Line of Section 2 Tow	vnship 22-S Range 3	37-Е , ммрм,	Lea County		
u.	DESIGNATION OF TRANSPORT	OF OIL AND NATURAL GA	S Address (Give address to which ap	proved copy of this form is to be sent)		
	Name of Authorized Transporter of Casinghead Gas or Dry Gas		Address (Give address to which approved copy of this form is to be sent)			
	El Paso Natural Gas Company		P. O. Box 1384, Jal, New Mexico 88252			
	If well produces oil or liquids, give location of tanks.		Yes	6-2-76		
	If this production is commingled wit COMPLETION DATA	th that from any other lease or pool,	give commingling order number:	PC-137		
٧.	Designate Type of Completic		Now Well Workover Deepen	Plug Back Same Stessy. Drift Reary.		
	Date Spudded	Date Compl. Ready to Prod. 5-31-76	Total Depth 7200	P.B.T.D.		
	5-1-76 Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oll/Gas Pay	Tubing Depth		
	3383 RKB	Drinkard	6267	6211 Depth Casing Shoe		
	Perforations	lege to the		Depth Chang the		
			CEMENTING RECORD	SACKS CEMENT		
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET 1120	520 sks Class "C"		
	13-3/4 8-3/4	7	7198	1550 sks Class "C"		
		2-3/8	6671			
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 allow able for this depth or be for full 24 hours)					
	Date First New Oil Run To Tanks Date of Test		Preducing Method (Flow, pump, ga	lift, etc.)		
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
	Actual Prod. During Tost	Oil-Bbla.	Water - Bbls.	Gda-MCF		
	GAS WELL Actual Fred, Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate		
	2400	24	-	Choke Size		
	Teating hiothed (pitot, back pr.)	Tubing Prossure (Shuu-iu) 180	Casing Pressure (Shut-in) 400	3/4"		
/1.	CERTIFICATE OF COMPLIANCE		OIL CONSER	VATION COMMISSION		
	I hereby cortify that the rules and	hereby certify that the rules and regulations of the Oil Conservation		. 19		
Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		BY Strait Chiles				
			TITLE			
	3. C. Ja	inder	ii aanaa aa	In compliance with RULE 1104. Howeble for a newly difficier despense espenied by a tabulation of the deviation		
			H WATE this form fauti be accou	CONTRACTOR SECTION AND CONTRACTOR OF THE SECTION OF		

tests taken on the well in accordance with RULL 111.

All sections of this form must be filled out completely for allowable on now and accompleted walls.

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