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LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-11
Effective 1-1-65

Operator Exxon Corporation	
Address Box 1600, Midland, TX 79701	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well ☒	Change in Transporter of:
Recompletion ☐	Oil ☐ Dry Gas ☐
Change in Ownership ☐	Casinghead Gas ☐ Condensate ☐

If change of ownership give name
and address of previous owner

I. DESCRIPTION OF WELL AND LEASE

Lease Name New Mexico "S" State	Well No. 31	Pool Name, including Formation Wantz Abo	Kind of Lease State, Federal or Fee	Lease No. B-934
Location Unit Letter <u>H</u> ; <u>1660</u> Feet From The <u>North</u> Line and <u>810</u> Feet From The <u>East</u> Line of Section <u>2</u> Township <u>22-S</u> Range <u>37-E</u> , NMPL, Lea County				

EFFECTIVE JANUARY 31, 1977,
SHELLY OIL COMPANY MERGED
INTO GETTY OIL COMPANY.

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Texas New Mexico Pipeline Co.	Address (Give address to which approved copy of this form is to be sent) Box 1510, Midland, TX 79701					
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐ <i>Shelly Oil Co</i>	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 F	Sec. 2	Twp. 22-S	Rge. 37-E	Is gas actually connected? Yes	When 8-28-76

If this production is commingled with that from any other lease or pool, give commingling order number: PC-137

V. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well ☒	Gas Well	New Well ☒	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 6-7-76	Date Compl. Ready to Prod. 8-25-76		Total Depth 7697		P.E.T.D.			
Elevations (DF, RKB, RT, GR, etc.) RKB 3373	Name of Producing Formation Wantz Abo		Top Oil/Gas Pay 6848		Tubing Depth 6736			
Perforations <i>6-1/4" x 120'</i>		Depth Casing Shoe						

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
13-3/4	10-3/4	1151	670
8-3/4	7	7200	2070
6-1/4	Open Hole		
	2-3/8 Tbg.	6736	

VI. 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)

Date First New Oil Run To Tanks 8-23-76	Date of Test 8-28-76	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 24 Hrs.	Tubing Pressure 110	Casing Pressure -	Choke Size 16/64
Actual Prod. During Test 17	Oil-Bbls. 17	Water-Bbls. 0	Gas-MCF 47

GAS WELL

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

III. 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.

A R Channer
(Signature)

Unit Head

(Title)

9-15-76

(Date)

OIL CONSERVATION COMMISSION

APPROVED SEP 21 1976, 19

BY *John W. Rung*

TITLE *Geologist*

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 deviated 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 change of name, well name or number, or transporter or other such change of condition.