

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator Mobil Producing TX. & N.M. Inc.*		Well APT No. 30-025-25322
Address *Mobil Exploration & Producing U.S. Inc. as Agent for Mobil Producing TX. & N.M. Inc. P. O. Box 633, Midland, Texas 79702		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input type="checkbox"/>	Change in Transporter of:	
Recompletion <input checked="" type="checkbox"/>	Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name S. E. LONG	Well No. 9	Pool Name, including Formation WANTZ ABO	Kind of Lease State, Federal or Fee FEE	Lease No.
Location Unit Letter J, 1780 Feet From The SOUTH Line and 1980 Feet From The EAST Line Section 11 Township 22S Range 37E, NMPM, LEA County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil TEXAS-NEW MEXICO PIPELINE <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) BOX 1510, MIDLAND, TX 79702					
Name of Authorized Transporter of Casinghead Gas TEXACO PRODUCING INC. <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) BOX 52332, HOUSTON, TX 77052					
If well produces oil or liquids, give location of tanks.	Unit 0	Sec. 11	Twp. 22S	Rge. 37E	Is gas actually connected? YEA	When? 10/28/77

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well X	Gas Well	New Well	Workover	Deepen X	Plug Back	Same Res'v	Diff Res'v X
Date Spudded 2/11/92	Date Compl. Ready to Prod. 3/4/92		Total Depth 7350		P.B.T.D. 7050			
Elevations (DF, RKB, RT, GR, etc.) 3355	Name of Producing Formation WANTZ ABO		Top Oil/Gas Pay		Tubing Depth			
Perforations 6752-6910					Depth Casing Shoe			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
11	8-5/8		1200		700			
7-7/8	4-1/2		7050		3200			

V. TEST DATA AND REQUEST FOR ALLOWABLE

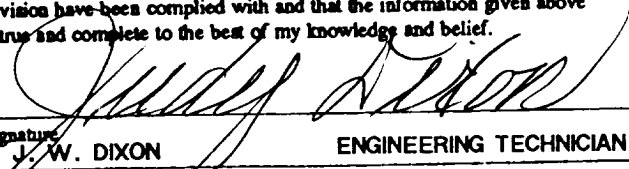
OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)			
Date First New Oil Run To Tank 3/4/92	Date of Test 3/4/92	Producing Method (Flow, pump, gas lift, etc.) 8.0 X 1-1/4 X 72 SPM PUMP	
Length of Test 24	Tubing Pressure --	Casing Pressure --	Choke Size 6/64
Actual Prod. During Test	Oil - Bbls. 4	Water - Bbls. 11	Gas - MCF 50

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

VI. OPERATOR CERTIFICATE OF COMPLIANCE

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.

Signature 
J. W. DIXON ENGINEERING TECHNICIAN
Printed Name Date MARCH 31, 1992 Title (915) 688-2452 Telephone No.

OIL CONSERVATION DIVISION

Date Approved

APR 02 '92

By

Orig. Signed by
Paul Kautz
Geologist

Title

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.