| ENERGY AND MINERALS DEPARTMENT | | | | | Form C-10 | 94 |
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| | OIL CONSERV | | | | Revised 1 Format Of Page 1 | |
| | | DX 2088 | | | | |
| V.8.G.4. | SANTA FE, NE | W MEXICO | 0 87501 | | | |
| TAAUSPONTER OIL | | | | | | |
| CPERATOR CPERATOR | REQUEST FO | OR ALLOWAE | BLE | | | |
| PROMATION OFFICE | AUTHORIZATION TO TRANS | | ND NATURAL G | AS | | |
| Operator | | | | | | |
| Mobil Producing TX & | NM Inc. | | | | | |
| | ite 2700, Houston, TX | 77046 | | | | |
| Reason(s) for filing (Check proper box) | | | nher (Please esplain | V | | |
| New Well | Change in Transporter ef: | Ary Ges | Change Ope | rator N | lame from | |
| X Change in Ownership | | | The Superi | or Oil | Company APR | 1 1986 |
| | <u> </u> | | | | | |
| If change of ownership give name The and address of previous owner | Superior Oil Company | , 9 Green | way Plaza, S | te 2/00 | , Houston, | 1X //04 |
| | | | | | | |
| I. DESCRIPTION OF WELL AND L | EASE | | | | | |
| II. DESCRIPTION OF WELL AND L | Well No. Pool Name, Including F | | | Lease | | Lease |
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IV. COMPLETION DATA

| Designate Type of Completi | on - (X) | Oil Well | Gas Well | New Well | Workover t | i Deepen i | i Plug Back I I | Same Res'v. | Diff. Res'y. |
|------------------------------------|-----------------------------|-----------|-----------------|--|---------------|---------------|-----------------------|-------------|---------------------------------------|
| Data Spuddad | Date Compl. Ready to Prod. | | Total Depth | | | P.B.T.D. | | | |
| Elevetions (DF, RKB, RT, GR, etc.) | Name of Producing Formation | | Top Oll/Gas Pay | | | Tubing Depth | | | |
| Perforations | 1 | | | <u>. </u> | <u> </u> | | Depth Casi: | ng Shoe | |
| · | | TUBING, | CASING, AN | D CEMENTI | NG RECOR | D | <u> </u> | | |
| HOLE SIZE | CASI | NG & TUBI | NG SIZE | | DEPTH SE | Т | S | ACKS CEME | NT |
| | | | ····· | 1 | | | | | · · · · · · · · · · · · · · · · · · · |
| | | | | | | | | | |

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 OIL WELL coll for this depth or be for full 26 houre)

| Date First New Oll Run To Tanks | Date of Test | Producing Method (Flow, pump, gas lift, etc.) | | | |
|---------------------------------|-----------------|---|------------|--|--|
| Length of Test | Tubing Pressure | Casing Pressure | Chete Site | | |
| Actual Prod. During Test | QII-Bhis. | Water-Bbis. | Gas-MCF | | |
| | | | | | |

GAS WELL

| Actual Prod. Test-MCF/D | Length of Teat | Bble. Condensate/MMCF | Grevity of Condensate |
|---------------------------------|-----------------------------|---------------------------|-----------------------|
| Testing Method (publ, back pr.) | Tubing Pressure (Shut-in) | Casing Pressure (Shut-18) | Choke Size |

