	_				
	DISTRIBUTION	<u> </u>			
	DISTRIBUTION /		CONSERVATION COMM	Form C-104	
	FILE 1 V	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-110 Effective 1-1-65	
	U.S.G.S.	ALITHOPIZATION TO TR	AND	FURCHAR 1-1-92	
	LAND OFFICE	AUTHORIZATION TO TR	AND ANSPORT OIL AND NATURAL	CASESEIVED	
	TRANSPORTER OIL /				
	GAS /	_		A contractor	
	OPERATOR /	_		FF 3 1 8 1971	
1.	PRORATION OFFICE				
	ARWOOD, LTD.				
	Address Address				
	P.O. Box 20200, Dallas, Taxas 75220				
	Reason(s) for filing (Check proper box) Other (Please explain)				
	New Well	Change in Transporter of:			
	Recompletion	Oil Dry G	as Lil		
	Change in Ownership Casinghead Gas Condensate				
	If change of ownership give name and address of previous owner	Stallworth 811 & Gas,	407 West Missouri Avenu	a, Midland, Toxas 79701	
II.	DESCRIPTION OF WELL AND Lease Name	LEASE Well No. Pool Name, Including F	Formation Kind of Lea	Se Company	
	Parke			Ledse No.	
	Location	3 Square Lens	erayburg - 2/1	al or Fee Federal LC 029029-J	
	Unit Letter : 187	Feet From The Me: th Li	ne and 1874 Feet From	The East	
	Line of Section 3 To	wnship 7 Range	30 , NMPM, E	ddy County	
III.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	AS		
_	Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which appro	oved copy of this form is to be sent)	
	Navajo Refining Co., Name of Authorized Transporter of Car	Pipe Line Div. singhead Gas Y or Dry Gas	Ho. Freeman Ave., Ar Address (Give address to which appro	tesia, N. M. 88210	
	Continental 011 Comp		P. B. Bex 2197, Houst		
	If well produces oil or liquids,	Unit Sec. Twp. Rge.		nen	
	give location of tanks.	A 3 17 30	Yes		
	If this production is commingled wi	th that from any other lease or pool,			
V.	COMPLETION DATA				
	Designate Type of Completic		New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.	
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	·			1.5.1.5.	
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
	Perforations			Depth Casing Shoe	
			D CEMENTING RECORD		
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
				+	
			,		
				+	
v.	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a	after recovery of total volume of load oil	and must be equal to or exceed top allow-	
•	OIL WELL able for this de		pth or be for full 24 hours)		
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas li	ft, etc.)	
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
	Actual Bred Dustra Tort	Oil-Bbls.	Water - Bbls.	Canada	
	Actual Prod. During Test	On-Built.	water - DDIE.	Gas-MCF	
ŀ		<u> </u>			
	GAS WELL				
ſ	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
Ì	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
/1.	CERTIFICATE OF COMPLIANCE		OIL CONSERVA	ATION COMMISSION	
			MAR 4	1971	
	hereby certify that the rules and regulations of the Oil Conservation		APPROVED	13/1 , 19	
	Commission have been complied with and that the information given bove is true and complete to the best of my knowledge and belief.		BY W. a. Gressett		
	•	,	OIL AND GAS INSPECTOR		
ARMOGO, LTD.			TITLE OIL AND GAS INSPECTOR		

ARWOOD, LTD.

Frazier Anwed Gen. Partner (Title) Feb. 1, 1971

(Date)

This form is to be filed in compliance with RULE 1104.

TITLE __

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation 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 changes of owner, well name or number, or transporter, or other such change of condition. Separate Forms C-104 must be filed for each pool in multiply