	NO. OF COPIES RECEIVED				
	DISTRIBUTION SANTA FE		CONSERVATION CO3SION	Form C-104 Supersedes Old C-104 and C-	
	U.S.G.S.		AND	Effective 1-1-65	
	LAND OFFICE	AUTHORIZATION TO TR	RANSPORT OIL AND NATURAL		
	TRANSPORTER OIL GAS		RECEIVER		
1.	OPERATOR 2 PRORATION OFFICE Operator		Aga Y		
	David Fasken				
	608 First Natl. Ba	nk Bldg., Midland, Texas	79701		
	Reason(s) for filing (Check proper box	Effective 5-1-73	Other (Please explain)		
	New Well Recompletion Change in Ownership	Change in Transporter of: Oil Dry G		* * * * * * * * * * * * * * * * * * * *	
Ĺ		Casinghead Gas Conde	ensate XX		
1	If change of ownership give name and address of previous owner				
II.	Lease Name				
	Arco "10" Federal		ame, Including Formation	Kind of Lease	
-	Location		d (Morrow) Gas	State, Federal or Fee Federa	
	Unit Letter J;	1980 Feet From The East Li	ine and 1980 Feet From	The South	
Ĺ	Line of Section 10 To	wnship 19 S Range	25 E , NMPM,	Eddy County	
ш. г	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil				
İ	Navajo Crude Oil Purchasing Co.		Drawer 175 Artesia, New Mexico 88210		
	Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent)				
+	Transwestern Pipeli	Unit Sec. Twp. Rge.	Box 2521 Houston, Tex Is gas actually connected? W		
	If well produces oil or liquids, give location of tanks.	J 10 19-S 25-E		9-13-71	
IV.		th that from any other lease or pool,			
	Designate Type of Completion	$\operatorname{On} - (X)$ Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'	
. -	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
-	T-1				
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
	Perforations			Depth Casing Shoe	
		TUBING, CASING, AN	D CEMENTING RECORD		
-	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
-					
-					
V. 7	FEST DATA AND REQUEST FO	DR ALLOWABLE (Test must be c	ifter recovery of total volume of load oil	and must be equal to or exceed top allo	
	DIL WELL Date First New Oil Run To Tanks	able for this de	pth or be for full 24 hours) Producing Method (Flow, pump, gas lift, etc.)		
	Proc.		Froducing Marinoa (From, pump, gas tijt, etc.)		
			_L		
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
	Length of Test Actual Prod, During Test	Tubing Pressure Oil-Bbls.	Casing Pressure Water-Bbls.	Choke Size Gas-MCF	

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

VI. 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.

OIL CONSERVATION COMMISSION MAY 2 1973

APPROVED

TITLE OIL AND GAS INSPECTOR

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 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 completed wells.

(Signature)

(Title)

Agent

S. L. Parks

April 27, 1973 (Date)