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TRANSPORTER	OIL	
	GAS	
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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-110
Effective 1-1-65

B.R.

I.

Operator ARCO Oil and Gas Company, Division of Atlantic Richfield Company	
Address Suite 501, 1860 Lincoln Street, Denver, Colorado 80295	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name and address of previous owner Atlantic Richfield Co.

II. DESCRIPTION OF WELL AND LEASE

Lease Name Tonkin	Well No. 2	Pool Name, including Formation West Lindrith Gallup-Dakota	Kind of Lease Federal State, Federal or Fee	Lease No. SF-080472-A
Location				
Unit Letter <u>G</u> ; <u>2134</u> Feet From The <u>North</u> Line and <u>1850</u> Feet From The <u>East</u>				
Line of Section <u>18</u> Township <u>24N</u> Range <u>3W</u> , NMPM, <u>Rio Arriba</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Permian Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1702, Farmington, New Mexico 87401	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 990, Farmington, New Mexico 87401	
If well produces oil or liquids, give location of tanks.	Unit G	Sec. 18
	Twp. 24N	Rge. 3W
	Is gas actually connected? When Not as of this date - - -	

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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 11-21-76	Date Compl. Ready to Prod. 2-27-79	Total Depth 7688'	P.B.T.D. 7648'					
Elevations (DF, RKB, RT, GR, etc.) 6922' GR; 6936' KB	Name of Producing Formation Dakota "A", "B" & "C"	Top Oil/Gas Pay 7307'	Tubing Depth 7400'					
Perforations Dakota A, 7370-62', 7347-18', 7314-07' w/1 shot/ft (47 holes); Dakota B, 7434-25' w/2 shots/ft (19 holes); Dakota C, 7536-04' w/2 shots/ft.		Depth Casing Shoe 7688'						
TUBING, CASING, AND CEMENTING RECORD (65 holes).								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	8-5/8" OD 24# K-55		328' RKB		300 sx			
7-7/8"	5-1/2" OD 17# & 15.5# N-80 & K-55.		7688' RKB		1st stage: 400 sx 2nd stage: 250 sx			

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 Tanks 2-27-79	Date of Test 2-27-79	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 12 hrs	Tubing Pressure 75#	Casing Pressure 720#	Choke Size Adjustable choke
Actual Prod. During Test 147	Oil-Bbls. (24 hr rate) 147 (294 BOPD)	Water-Bbls. 144 (24 hr rate)	Gas-MCF 800 (24 hr rate)

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. 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.

B. R. Still
B. R. Still (Signature)
Operations Information Assistant
(Title)
March 28, 1979
(Date)

OIL CONSERVATION COMMISSION
APPROVED MAR 30 1979
BY Original Signed by A. R. Kendrick
TITLE SECRETARY

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.

