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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

I. Operator  
ATLANTIC RICHFIELD COMPANY, SUCCESSOR BY MERGER TO SINCLAIR OIL CORPORATION  
Address  
501 Lincoln Tower Bldg., 1860 Lincoln St., Denver, Colorado 80203  
Reason(s) for filing (Check proper box) Other (Please explain)  
New Well ☒ Change in Transporter of:  
Recompletion ☐ Oil ☐ Dry Gas ☐  
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

If change of ownership give name  
and address of previous owner \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE

Lease Name Oxnard WN Federal	Well No. 7	Pool Name, Including Formation So. Blanco - Pictured Cliffs	Kind of Lease State, Federal or Fee Federal	Lease No. SF-078476
Location Unit Letter J ; 1450 Feet From The South Line and 1450 Feet From The East Line of Section 15 Township 27N Range 8W , NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
El Paso Natural Gas Company	P. O. Box 1492, El Paso, Texas					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
					No	

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'tv.	Diff. Res'tv.
		X	X					
Date Spudded 3-2-69	Date Compl. Ready to Prod. 4-9-69	Total Depth 2225' GLM	P.B.T.D. 2192' GLM					
Elevations (DF, RKB, RT, GR, etc.) 5890' GL	Name of Producing Formation Pictured Cliffs	Top Oil/Gas Pay 2073'	Tubing Depth 2090'					
Perforations Pictured Cliffs 2073-90' w/2 holes/ft.			Depth Casing Shoe 2225'					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12-1/4"	8-5/8"	191'	200 sx Class "A"					
7-7/8"	4-1/2"	2225'	100 sx HOWCO "Lite"					
	2-3/8"	2090'						

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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test-MCF/D 1490	Length of Test 17 hrs	Bbls. Condensate/MMCF 0	Gravity of Condensate -
Testing Method (pitot, back pr.) Pitot	Tubing Pressure (Shut-in) 832# (13 days)	Casing Pressure (Shut-in) 835# (13 days)	Choke Size 2" Open tubing.

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.

M. E. Brown  
M. E. Brown (Signature)  
Chief Office Clerk  
(Title)  
April 28, 1969  
(Date)

OIL CONSERVATION COMMISSION  
APR 30 1969  
APPROVED \_\_\_\_\_  
BY Original Signed by Emery C. Arnold  
TITLE SUPERVISOR DIST. #3

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.