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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

Operator	
Atlantic Richfield Company	
Address	
501 Lincoln Tower Bldg., 1860 Lincoln St., 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 type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name
and address of previous owner ----

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Graham "C" WN Federal Com.	1-A	Blanco Mesaverde	State, Federal or Fee Federal	NM-05791
Location				
Unit Letter	0	1050 Feet From The	South	Line and 1600 Feet From The
Line of Section	9	Township	27North	Range 8West, 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 checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Platau, Inc.	P.O. Box 108, Farmington, New Mexico 87401					
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 990, Farmington, New Mexico 87401					
If well produces oil or liquids, give location of tanks. Will be:	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	0	9	27N	8W	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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		X	X					
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
8/1/77	11/15/77		4720'		4684'			
Elevations (DF, RKB, RT, CR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
6048'	Mesaverde		3891'		3898'			
Perforations 1 jet shot each at: 3891,96; 3902; 4366,69; 4423,26; 4535,38, 41,44,47,52,68,71,83,85,95,98; 4622,25,40,43 (23 holes)					Depth Casing Shoe			
					4719'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	8-5/8"OD 21#		259.53'KB		200 ax			
7-7/8"	5-1/2"OD 15.5#		4719.00'KB		800 ax in 2 stages			
Tubing	2-1/16"OD 3.25#		3898.42'					

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.)	
		RELIEVE	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
			JAN 6 1978
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	CON. COM. DIST. 3

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
1020 in 3 hrs.	3 hrs.	---	---
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size
Critical flow prover	20 days - 905#	Shut off w/packer	3/4" plate

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.

P. F. Hall
(Signature)
Operations Information Assistant
(Title)
January 3, 1978
(Date)

OIL CONSERVATION COMMISSION
JAN 6 1978
APPROVED _____, 19____
BY Original Signed by A. R. Kendrick
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.