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LAND OFFICE	
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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

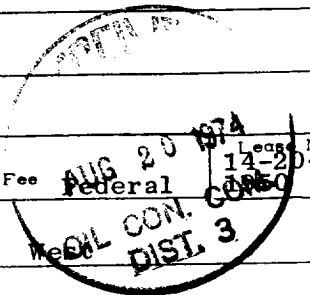
Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

B.K.

Operator Atlantic Richfield Company	
Address P. O. Box 2197, Farmington, New Mexico 87401	
Reason(s) for filing (Check proper box)	Other (Please explain)
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 Horseshoe Gallup Unit	Well No. 284	Pool Name, Including Formation Horseshoe Gallup	Kind of Lease State, Federal or Fee
Location Unit Letter L ; 2580 Feet From The South Line and 295 Feet From The			
Line of Section 35 Township T31N Range R16W , NMPM, San Juan 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"/> Shell Pipeline Company	Address (Give address to which approved copy of this form is to be sent) 1215 S. Lake Avenue, Farmington, N.M. 87401
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
	E 34 T31N R16W

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 X		
Date Spudded 07/16/74	Date Compl. Ready to Prod. 08/13/74	Total Depth 1450' RKB	P.B.T.D. 1428' RKB
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation Gallup	Top Oil/Gas Pay 1383	Tubing Depth 1414' RKB
Perforations 1383' - 1416' 4 holes/ft.			Depth Casing Shoe 1449' RKB
TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4	8 5/8"	127' RKB	100 SX
7 7/8	4 1/2"	1449' RKB	215 SX
	2 3/8"	1414' RKB	

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 08/13/74	Date of Test 08/13/74	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 19 Hr.	Tubing Pressure -	Casing Pressure -	Choke Size -
Actual Prod. During Test 15 Bbls	Oil-Bbls. 3	Water-Bbls. 12	Gas-MCF TSTM

GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, 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.	
Production Supervisor	
(Title)	
August 19, 1974	
(Date)	

OIL CONSERVATION COMMISSION	
AUG 20 1974	
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.	