

DISTRICT II
 P.O. Drawer DD, Artesia, NM 88210

OIL CONSERVATION DIVISION

P.O. Box 2088
 Santa Fe, New Mexico 87504-2088

DISTRICT III
 1000 Rio Brazos Rd., Aztec, NM 87410

**REQUEST FOR ALLOWABLE AND AUTHORIZATION
 TO TRANSPORT OIL AND NATURAL GAS**

Well Files

I.

Operator: VASTAR RESOURCES, INC. 36619 Well API No. 30-045-27728

Address: 1816 E. MOJAVE, FARMINGTON, NEW MEXICO 87401

Reason(s) for Filing (Check proper box) Other (Please explain)

New Well Change in Transporter of: Dry Gas

Recompletion Oil Casinghead Gas Condensate Effective date 03/01/94

Change in Operator

If change of operator give name and address of previous operator: ARCO Oil and Gas Company, 1816 E. Mojave, Farmington, NM 87401

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>H132 ATLANTIC FRUITLAND 32</u>	Well No. <u>1</u>	Pool Name, including Formation <u>BASIN FRUITLAND COAL 71627</u>	Kind of Lease (State, Federal or Fee) <u>State</u>	Lease No. <u>E-2724-2</u>
Location				
Unit Letter <u>K</u>	<u>1500</u> Feet From The <u>South</u> Line and <u>1350</u> Feet From The <u>West</u> Line			
Section <u>32</u> Township	<u>31N</u> Range	<u>10W</u> , <u>NMPM</u> ,	<u>San Juan</u>	County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent)

Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent)
Mexican Oil Inc (486530)

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: 486550

IV. COMPLETION DATA

Designate Type of Completion - (X)	<input type="checkbox"/> Oil Well	<input type="checkbox"/> Gas Well	<input type="checkbox"/> New Well	<input type="checkbox"/> Workover	<input type="checkbox"/> Deepen	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Same Res'v	<input type="checkbox"/> Diff Res'v
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
Perforations						Depth Casing Shoe		

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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 Tank	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

RECEIVED
FEB 17 1994
OIL CON. DIV.
DIST. 3

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. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

R. D. Johnston
 Signature
R. D. Johnston Operations Superintendent
 Printed Name
02/16/94 505-599-4325
 Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved FEB 17 1994

By [Signature]
 Title SUPERVISOR DISTRICT 13

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- All sections of this form must be filled out for allowable on new and recompleted wells.
- Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- Separate Form C-104 must be filed for each well.