Submit 5 Copies Appropriate District Office DISTRICT I P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

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., Aziec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION

.		TO TRAN	ISPO	HI OIL	AND NA	TURAL G	T Wall	API No.	 -		
Operator ARCO OIL & GAS COMPANY						30-025-05981					
	PITANT										
Address P O BOX 1710	новвя	s, NEW N	MEXIC	0 88	3240						
Reason(s) for Filing (Check proper box	r)				Oth	A (Please expl		.a	EDOM		
New Well	•	Change in T	masporte	r of:		CHANGE NAME FROM					
Recompletion	Oil	Oil 🔲 Dry Ges 🖳				BERT			HA J BARBER #18		
Change in Operator	Casinghea	d Gas 🔲 🤇	Condensa								
change of operator give name											
ad address of previous operator	<u> </u>										
L DESCRIPTION OF WEL	L AND LEA	ASE					1 20: 4	of Lease		ease No.	
Lease Name BARBER GAS COM		Well No. Pool Name, including				ng Formation YATES 7 RQ GB			- 1	———	
Location						200			EACE.		
Unit Letter H	:1	<u>650</u> F	eat From	The No	rth Lin	and330	F	set From The	EAST	Line	
				07 5		m. T	EA			County	
Section 7 Town	uship 20 S	F	Cange	<u>37 E</u>	, N	/IPM, I	LEA				
		D OF OH	4 3 770	NIA TTI	DAT CAS						
II. DESIGNATION OF TRA	ANSPORTE	or Condensa	ANU	NATU	Address (Giv	e address to wi	hich approved	copy of this	orm is so be so	pw()	
Name of Authorized Transporter of Oi	· 🖂	Of COURSE					• • •			•	
lame of Authorized Transporter of Casinghead Gas or Dry Gas X					Address (Give address to which approved copy of this form is to be sent) BOX 1589 TULSA OKLA. 74102						
WARREN PETROLEUM		Sec. 1	Np.	Por	Is gas actually		When				
If well produces oil or liquids, give location of tanks.	Unit	Sec. I	1 4 I	r.g.	YES	,	i	1/11/	93		
f this production is commingled with the		er lesses of 20	val pive	comming		er.					
f this production is commingled with the IV. COMPLETION DATA	nat from any ou	el rease of po	AA, ga 10 .								
V. COMPLETION DATA		Oil Well	Gas	s Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completic	on - (X)	lon wen	-	X			Ì	İ	l	1	
Date Spudded		pl. Ready to P	rod.		Total Depth			P.B.T.D.		-	
12/09/92		12/15/92				5250			3535		
Elevations (DF, RKB, RT, GR, etc.)		Name of Producing Formation				Top Oil/Gas Pay			Tubing Depth		
3554 GR	1	QUEEN				2954			3315		
Perforations		<u> </u>						Depth Casin	ng Shoe		
2954-3389								<u> </u>			
2754-5507	1	UBING, C	CASINO	G AND	CEMENTI	NG RECOR	<u>D</u>	,			
HOLE SIZE		CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT		
FIGEL SIZE		13 7/8			48			1000			
		9 5/8			2904 5249			1400			
	7							300			
	2 3	/8			3315			J			
. TEST DATA AND REQU	CCT EOD	LIOWA	BLE						4 - 8 11 34 h	1	
V. TEST DATA AND REQU OIL WELL (Test must be aft	er recovery of u	otal volume of	f load oil	and must	be equal to or	exceed top all	owable for th	s depin or be	jor juli 24 nou	73.)	
Date First New Oil Run To Tank	Date of Te				Producing Me	thod (Flow, p	emp, gas igt,	esc.)			
									Choke Size		
Length of Test	Tubing Pre	Tubing Pressure			Casing Pressure			Sales Sine			
_					Phile			Gas- MCF			
Actual Prod. During Test	Oil - Bbis.				Water - Bbis.						
					<u></u>						
GAS WELL											
Actual Prod. Test - MCF/D	Length of	Length of Test				Bbis. Condensate/MMCF			Gravity of Condensate		
64		24) 		Choke Size			
Testing Method (pitot, back pr.)	Tubing Pro	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			AUMPING		
								J.am	7177 0-		
VL OPERATOR CERTIF	TCATE OF	COMPI	JANC	Œ		DIL CON	ICED\	ATION	חווופור	NI.	
I hereby certify that the rules and r	andstine of the	Oil Constv	ation		(JIL CON	NOEUA	AHON	DIVIDIC		
Division have been complied with a	and that the info	UNICOS BASE	above		li .				12 1 15th	į	
is true and complete to the best of a	my knowledge a	ed belief.			Date	Approve	d				
_						Orig. S	Signed by	•			
fund Cy	gh				D.,	Paul	Kauta	•	•		
Signature /					∬ By_	Ge	ologisti				
JAMES COGBURN	OPER/	TIONS C		LNATOI							
Printed Name			Tale) 391–1	1600	Title				 		
1/20/93			home No.		il					`	
Date					*1						

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

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.

 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.