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TRANSPORTER	OIL		
	GAS		
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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  
Address  
P. O. Box 1710, Hobbs, New Mexico 88240  
Reason(s) for filing (Check proper box)  
New Well ☐ Change in Transporter of:  
Recompletion ☒ Oil ☐ Dry Gas ☐  
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐  
Other (Please explain)

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name State "Y"	Well No. 9	Pool Name, including Formation Justis Montoya	Kind of Lease State, Federal or Fee State	Lease No. B-11478
Location Unit Letter A, 990 Feet From The North Line and 990 Feet From The East Line of Section 25 Township 25S Range 37E, NMPM, Lea 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"/> Texas New Mexico Pipeline Company	Address (Give address to which approved copy of this form is to be sent) Box 1510, Midland, Texas 79701					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) Box 1384, Jal, New Mexico 88252					
If well produces oil or liquids, give location of tanks.	Unit A	Sec. 25	Twp. 25S	Rge. 37E	Is gas actually connected? Yes	When

If this production is commingled with that from any other lease or pool, give commingling order number: R-1337

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date <del>8/25/76</del> Commenced W.O.	Date Compl. Ready to Prod.	Total Depth			P.B.T.D.			
8/25/76	9/2/76	6908'			6890'			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay			Tubing Depth			
3069' GR	Montoya	6834'			6684'			
Perforations					Depth Casing Shoe			
6834-38, 6849-56, 6868-80'					6200'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT		
No change in casing & liner		2-3/8" OD		6684'				

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 9/2/76	Date of Test 9/20/76	Producing Method (Flow, pump, gas lift, etc.) Pump - Kobe Hyd.	
Length of Test 24 hrs	Tubing Pressure 2650#	Casing Pressure Pkr	Choke Size -
Actual Prod. During Test 135	Oil-Bbls. 56	Water-Bbls. 79	Gas-MCF 29

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.

C. L. Shackelford  
(Signature)

Accountant I

(Title)

9/22/76

(Date)

OIL CONSERVATION COMMISSION

APPROVED \_\_\_\_\_, 19\_\_\_\_

BY John W. Runyan

TITLE \_\_\_\_\_

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.