

District I
PO Box 1980, Hobbs, NM 88241-1980

State of New Mexico
Energy, Minerals & Natural Resources Department

Form C-104
Revised February 10, 1994

District II
PO Drawer DD, Artesia, NM 88211-0719

OIL CONSERVATION DIVISION
PO Box 2088
Santa Fe, NM 87504-2088

Instruction on back
Submit to Appropriate District Office
5 Copies

District IV
PO Box 2088, Santa Fe, NM 87504-2088

corrected ☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

¹ Operator Name and Address ARCH PETROLEUM INC. 10 DESTA DRIVE, STE. 420E, MIDLAND TX 79705		² OGRID Number 000962	
		³ Reason for Filing Code NW	
⁴ API Number 30 - 025-22499	⁵ Pool Name TEAGUE/BLINEBRY		⁶ Pool Code 58300
⁷ Property Code 014898	⁸ Property Name C. E. LAMUNYON		⁹ Well Number 58

II. ¹⁰ Surface Location

UI or Lot. No. G	Section 28	Township 23S	Range 37E	Lot Idn.	Feet from the 2310'	North/South Line NORTH	Feet from the 1340'	East/West Line EAST	County LEA
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¹¹ Bottom Hole Location

UI or Lot. No.	Section	Township	Range	Lot Idn.	Feet from the	North/South Line	Feet from the	East/West Line	County
¹² Lse Code F	¹³ Producing Method Code P	¹⁴ Gas Connection Date 9/9/96	¹⁵ C-129 Permit Number		¹⁶ C-129 Effective Date		¹⁷ C-129 Expiration Date		

III. Oil and Gas Transporters

¹⁸ Transporter OGRID	¹⁹ Transporter Name and Address	²⁰ POD	²¹ O/G	²² POD ULSTR Location and Description
007440	EOTT ENERGY PIPELINE PARTNERSHIP, P. O. BOX 1660 MIDLAND, TX 79702	709610	O	
020809	SID RICHARDSON CARBON 201 MAIN ST., FORT WORTH, TX 76102	709630	G	

IV. Produced Water

²³ POD 709650	²⁴ POD ULSTR Location and Description
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V. Well Completion Data

²⁵ Spud Date 7/17/96	²⁶ Ready Date 8/13/96	²⁷ TD 5979'	²⁸ PBTD 5957'	²⁹ Perforations 5395'-5889'
³⁰ Hole Size 11"	³¹ Casing & Tubing Size 8 - 5/8"	³² Depth Set 1092'	³³ Sacks Cement 400 SX	
(Ran 1" pipe dn. Backside, TOC' sx cement and circ. 105 sx)		@ 150', pumped 150 sx thru 1" pipe, TOC @80', pumped 85		
7-7/8"	5-1/2"	5979'	1300 sx; circ 80 sx.	
	2 - 3/8"	5300'		

VI. Well Test Data

³⁴ Date New Oil 8/14/96	³⁵ Gas Delivery Date 8/22/96	³⁶ Test Date 9/9/96	³⁷ Test Length 24	³⁸ Tbg. Pressure	³⁹ Csg. Pressure
⁴⁰ Choke Size 15	⁴¹ Oil	⁴² Water 255	⁴³ Gas 20	⁴⁴ AOF	⁴⁵ Test Method PF

⁴⁶ I hereby certify that the rules 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.

Signature: *Bobbie Brooks*

Printed Name:
BOBBIE BROOKS

Title:
PRODUCTION ANALYST

Date: *9/25/96*

Phone:
915-685-1961

Approved by:

Title:

Approved Date: *OCT 01 1996*

⁴⁷ If this is a change of operator fill in the OGRID number and name of the previous operator

Previous Operator Signature	Printed Name	Title	Date
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IF THIS IS AN AMENDED REPORT, CHECK THE BOX
Labeled "AMENDED REPORT" AT THE TOP OF THIS
DOCUMENT
578970

Ad

22

The ULSTR location of this POD if it is different from the well completion location and a short description of the POD

23

The POD number of the storage from which water is moved from this property. If this is a new well or office will assign a number and write it here.

24

The ULSTR location of this POD is it is different from the well completion location and a short description of the POD (Example: "Battery A", "Jones CPD", etc.) CPD Water Tank", etc.)

25

MO/DA/YR drilling commenced.

26

MO/DA/YR this completion was ready to produce.

27

Total vertical depth of the well.

28

Plugback vertical depth.

29

Top and bottom perforation in this completion or casing shoe and TD if openhole.

30

Inside diameter of the well bore.

31

Outside diameter of the casing and tubing.

32

Depth of casing and tubing. If a casing liner show top and bottom.

33

Number of sacks of cement used per casing string.

34

The following test data is for an oil well it must be from a test conducted only after the total volume of load oil is recovered.

35

MO/DA/YR that new oil was first produced.

36

MO/DA/YR that gas was first produced into a pipeline.

36

MO/DA/YR t

36

1. Operator's name and address.

2. Operator's OGRID number. If you do not have one it will be assigned and filled in by the District office.

3. Reason for filling code from the following table:
NW New Well
RC Recompletion
CH Change of Operator
AO Add oil/condensate transporter
CO Change oil/condensate transporter
AG Add gas transporter
CG Change gas transporter
RT Request for test allowable (include volume requested)

4. The API number of this well.

5. The name of the pool for this completion.

6. The pool code for this pool.

7. The property code for this completion.

8. The property name (well name) for this completion.

9. The well number for this completion.

10. The surface location of this completion NOTE: If the United States government survey designates a Lot Number for this location use that number in the "UL or Lot No" box. Otherwise use the OCD unit letter.

11. The bottom hole location of this completion.

12. Lease code from the following table:
F Federal
S State
P Fae
J Jicarilla
N Navajo
U Ute Mountain Ute
I Other Indian Tribe

13. The producing method code from the following table:
F Flowing
P Pumping or other artificial lift

14. MO/DA/YR that this completion was first connected to a gas transporter.

15. The permit number from the District approved C-129 for this completion.

16. MO/DA/YR of the C-129 approval for this completion.

17. MO/DA/YR of the expiration of C-129 approval for this completion.

18. The gas or oil transporter's OGRID number.

19. Name and address of the transporter of the product.

20. The number assigned to the POD from which this product will be transported by this transporter. If this is a new well or recompletion and this POD has no number the district office will assign a number and write it here.

21. Product code from the following table:
O Oil
G Gas