

Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240
DISTRICT II
P.O. Drawer DD, Artesia, NM 88210
DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

OIL CONSERVATION DIVISION

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

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

Operator ARCO OIL AND GAS COMPANY		Well API No. 30-025-11773
Address BOX 1710, HOBBS, NEW MEXICO 88240		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input type="checkbox"/>	Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	EFFECTIVE: 1/16/92
Recompletion <input type="checkbox"/>	Casinghead Gas <input checked="" type="checkbox"/> Condensate <input type="checkbox"/>	
Change in Operator <input type="checkbox"/>		
If change of operator give name and address of previous operator		

Lease Name STATE Y		Well No. 5	Pool Name, Including Formation JUSTIS FUSSELMAN	Kind of Lease State, Federal or Fee	Lease No. STATE
Location Unit Letter B : 990 Feet From The NORTH Line and 2308 Feet From The EAST Line					
Section 25 Township 25S Range 37E, NMPM, LEA County					

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent) P. O. Box 2528, Hobbs, NM 88240				
Texas New Mexico Pipeline Co.		Address (Give address to which approved copy of this form is to be sent) P. O. Box 1226, Jal, NM 88252				
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>		Sid Richardson Gasoline Co.				
If well produces oil or liquids, give location of tanks.	Unit A	Sec. 25	Twp. 25	Rge. 37	Is gas actually connected? YES	When? 4/1/59

If this production is commingled with that from any other lease or pool, give commingling order number: R-1337 & R-8406
IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	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

GAS WELL		Bbls. Condensate/MMCF		Gravity of Condensate	
Actual Prod. Test - MCF/D	Length of Test	Casing Pressure (Shut-in)		Choke Size	
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)				

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.	
Signature James D. Cogburn, Operations Coordinator	Title 392-1600
Date 1/17/92	Telephone No.

OIL CONSERVATION DIVISION JAN 23 '92	
Date Approved	
By ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR	
Title	
FOR DISTRICT I SUPERVISOR APR 30 1992	

- 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 pool in multiply completed wells.

RECEIVED
APR 28 1993
OCD HOBBS OFFICE