DICTAINUTION PILE PILE USU.E. LAND DEFICE DIL INAMSPORTER

August 9, 1982

IL CONSERVATION DIVISIO.

P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

> REQUEST FOR ALLOWABLE AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Fill out only Sections 1, 11, 111, and VI for thanges 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 multiple condition wells.

	REGERALED			
	1982	:		
¥	- 6. €. 0			
Air.	ARTESIA, OFFICE			

BORATION OFFICE	1 6 €	D				
Anadarko Productio		ARTESIA.	OFFICE			
401488		0010		, 		
	Artesia, New Mexico 8		ase explain)			
eason(s) for liling (Check proper box		Joiner (7 tex	226 (2)/1=111/			
•~ W•II	Change in Transporter of:					
ecompletion		Gas				
hange in Ownership	Casinghead Gas Con	ndensale				
change of ownership give name d address of previous owner			· · · · · · · · · · · · · · · · · · ·			
ESCRIPTION OF WELL AND	LEASE					
ease Name	Well No. Pool Name, Including				Lease No.	
Arnold Federal Com.	1 Cedar Lake	Morrow Morth	Syby Federa	ol /4444/ /	NM-0558581	
ocation		1000		The East		
Unit Letter G : 198	North	Line and	Feet From	The Last	***	
Line of Section 34 T	wnahip 17S Range	30E , NM	РМ,	Eddy	County	
ESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL	GAS				
Came of Authorized Transporter of Ot	or Condensate	N3C:627 Othe project	ss to which appro	oved copy of this form	is to be sent)	
P G, Inc.		2223 Dodge S	treet, Umas	ha, Nebraska	66102	
lane of Authorized Transporter of Ca	singhead Gas or Dry Gas	Address (Give addres	ss to which appro	oved copy of this form	is to be sent)	
Transwestern Pipeline (Company			g. Suite 614,	Odessa, Texas	
(well produces oil or liquids,	Unit Sec. Twp. Rge.	}	ected? Wh	8-6-82	79761	
ive location of tanks.	<u></u>	BOE Yes		0-,9-02		
this production is commingled wi	th that from any other lease or po	ool, give commingling or	der number:	<u>.</u>		
OMPLETION DATA	Oil Well Gas We	New Well Workov	er Deepen	Plug Back Same	Hes'v. Dill. Res'v.	
Designate Type of Completi	on – (X)	X		· · · · · · · · · · · · · · · · · · ·		
ate Spudded	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.		
12-15-81	2-27-82	11,552		Tubing Depth		
levations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oll/Gas Pay		11,346'		
3550 GL Morrow		11,398	11,398'		Depth Casing Shoe	
erforations		1		11.552'		
11,398 - 11,434 @ 4 S	PF W/5" Diam. Total no	AND CEMENTING REC	ORD			
	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT	
HOLE SIZE	13-3/8 ^M		418'		400 sx circulated	
17-1/2** 12-1/4**	8-5/8'	3	,4641	2800 sx cir		
7-7/8"	4-1/2**		,552'	lst. Stage	- 950 ax	
7-776	1 7/ 1 1 1	10 m 0 2	2001)	2nd. Stage	- 475 sx (DV)	
EST DATA AND REQUEST F	OP STIOWARTE Comment	be after recovery of total s	volume of load oi	land must be equal to	or exceed top allow-	
H. WELL	able for the	in depth or be for juit 24 m	O LI A J			
rate First New Oll Run To Tanks	Date of Test	Producing Method (i	· tow, pump, gus	,., 4,		
		Casing Pressure		Choke Size		
ength of Teet	Tubing Pressure	Jan				
ictual Pred. During Test	Cii-Bble.	Water-Bbis.		Gas-MCF		
Celual Field. During 1001				<u></u>		
AS WELL		The Landson Commence Of the Co	WCF	Gravity of Conder	eate	
Actual Frod. Tool-MCF/D	Length of Test	Bale. Condepage	ded g 4-Point		nown	
8945	1 Hr. Tubing Pressure (Shut-in)	Casing Pressure (E		Choke Size		
esting wethod (pulot, back pr.)	3586	0		36/	64*	
Flowing		ni oii	CONSERVA	ATION DIVISION		
DRIFTIEICATE OF COMPLIAN	LE.			1000		
	taken of the Oil Conservat	APPROVED	AUG 1 9	1984	, 19	
hereby certify that the rules and vision have been complied wit		ny Lastie & Clamant				
ove is true and complete to th	161. 151 — 17/1-2-3-	11.01 -171				
() _	-) -	This form i	This form is to be filed in compliance with MULE 1104,			
(K 5 K)	11	If this is a request for allowable for a newly drilled or despenses well, this form must be accompanied by a tabulation of the deviation well, this form must be accompanied by a tabulation of the deviation.				
- All Holly Bis	naiwe)	well, this form t	must be accomp the well in acc	cordance with MULI	L 111.	
Area S	upervisor	I All ancition	a of this form n	nust he filled out co	ampletely for allow-	
(I	able on new an	able on new and succompleted wells.				