

AMOCO 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

RECEIVED

SEP 26 1973

O. C. C.
ARTESIA, OFFICE

ANTARCTIC	
FILE	
S.G.S.	
NAME AND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
REGISTRATION OFFICE	

Operator
Atlantic Richfield Company
 Address
P. O. Box 1710, Hobbs, N.M. 88240

Reason(s) for filing (Check proper box)
 New Well Change in Terms, etc. Included in Empire Abo Unit eff:10/01/73.
 Incompletion Change in lease name from CDDU #16.
 Change in Ownership Desaturated Change in

If change of ownership give name and address of previous owner
Exxon Corporation, P. O. Box 1600, Midland, TX 79701

II. DESCRIPTION OF WELL AND LEASE

Lease Name Empire Abo Unit S	Well No., Pool Name, Including Perforation 5 Empire Abo	Kind of Lease State, Federal or Fed. State	Lease No.
Location Unit Letter L 1980 Feet from the South Line of Section 660 Feet from the West	Line of Section 16 Township 18S Range 27E Meridian Eddy County		

* This is a split Gas Connection.

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter (Oil) or (Natural Gas)
AMOCO Pipe Line Company
 2300 Continental Bk. Bldg.
 Port Worth, TX 76102

Name of Authorized Transporter of Oil and Gas or (Oil) or (Natural Gas)
AMOCO Production Company
Phillips Petroleum Company
 P. O. Box 68, Hobbs, N.M. 88240
 Phillips Bldg., 4th & Washington, Odessa, TX 79700

If well produces oil or liquids, give location of tanks.
 Unit **H** 17 18S 27E
 When AMO 03/01/61
 PP 03/10/61

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same results	Diff. results
Date Spudded	Date Compl. Ready to Prod.	Total Depth	F.T.D.					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Facing Depth					
Perforations	Depth casing shoe							
TUBING, CASING, AND CEMENT LOG RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	BACKS CEMENT					

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of lead oil and must be equal to or exceed top value for this depth or in for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (flow, pump, gas lift, etc.)	
Length of Test	Testing Procedure	Gen. Production	Choke Size
Actual Prod. During Test	Oil-25 g.	Water-25 g.	Gen-MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Gen. Production/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Gauge-A)	Casing Pressure (Gauge-B)	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.

A. L. Shackelford
 Senior Accounting Clerk
 September 26, 1973
 (Date)

OIL CONSERVATION COMMISSION
 SEP 28 1973

APPROVED _____
 BY *W. A. Grissett*
 TITLE **OIL AND GAS INSPECTOR**

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 calculation of the deviation from plan 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 change 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.