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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-105  
 Effective 1-1-65

**RECEIVED**

**JAN 7 1977**

Operator Atlantic Richfield Company ✓		<b>O. C. C.</b>		
Address P. O. Box 1710, Hobbs, New Mexico 88240		<b>ARTESIA, OFFICE</b>		
Reason(s) for filing (Check proper box)		Other (Please explain)		
New Well <input type="checkbox"/>	Change in Transporter of:	Designate initial transporter of Condensate eff: 1-5-77.		
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/>			Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>			Condensate <input type="checkbox"/>

If change of ownership give name and address of previous owner \_\_\_\_\_

**II. DESCRIPTION OF WELL AND LEASE**

Lease Name State BT Com.	Well No. 1	Pool Name, including Formation Avalon Morrow Gas	Kind of Lease State, Federal or Fee State	Lease No. L-6705
Location Unit Letter <u>C</u> ; <u>1830</u> Feet From The <u>West</u> Line and <u>660</u> Feet From The <u>North</u>				
Line of Section 16	Township 21S	Range 26E	, NMPM, Eddy County	

**III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS**

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)			
Western Crude Oil Inc.	P. O. Box 1142, Midland, Tex 79701			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)			
<del>Gas Company of New Mexico</del> El Paso Natural Gas Company	1st International Bldg., Dallas, Tex 75270 Jal, New Mexico 88252			
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 16	Twp. 21	Rge. 26
	Is gas actually connected? Yes		When GC of NM EPNGC	10-14-76

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 Res'v.	Diff. Feat'g
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			
<b>TUBING, CASING, AND CEMENTING RECORD</b>								
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 Tanks	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**

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.

*[Signature]*  
 (Signature)

Accountant I

Title:

1-6-77

(Date)

OIL CONSERVATION COMMISSION

**JAN 11 1977**

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

BY *[Signature]*

TITLE SUPERVISOR, DISTRICT II

This form is to be filed in compliance with RULE 1104.  
 If this is a request for allowable for a newly drilled oil well, this form must be accompanied by a tabulation of the data 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 well name or number, or transporter, or other such change of data.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

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 ID-3  
 1-14-77