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Appropriate District Office
DISTRICT 1
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

## State Of INCM MICKICO 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

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410

Location	ISTRICT III 200 Rio Brazos Rd., Aziec, NM 87410	REQU	EST FO	OR ALI	LOWAB	LE AND A	UTHORIZ	5				
SBOL F. 41st., suite 1001, Tulsa, Oklohoma 74135  Lattock for Filing (Check proper box)  or Wall  competition  Okage in Transporter of condensus  Dry Gas  Non - Producing Oil Well  Actinghead Gas Condensus  Lase No.  Description OF WELL AND LEASE  AND LEASE  AND Norse Shoc Gallup Unit  Acting Actinghead Gas Condensus  Wall No Pool Name, Including Fornation  Wall Pool Name, Including Fornation  Kind of Lease  San, Fooders or Fee  Spr OS 1 2.2.  Lase No.  San, Fooders or Fee  Spr OS 1 2.2.  Lase No.  San, Fooders or Fee  Spr OS 1 2.2.  Lase No.  San, Fooders or Fee  Spr OS 1 2.2.  Lase No.  San, Juan  County  Section 3 Township 3 0 - N Range 6 - W NMPM, San Juan  County  Market Authorized Transporter of Canighead Gas or Condensus  In DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  Survey of Authorized Transporter of Canighead Gas or Condensus  Or Condensus  For High produces oil or liquid.  Value of Authorized Transporter of Canighead Gas or Condensus  For High produces oil or liquid.  Value of Authorized Transporter of Canighead Gas or Producing Fornation  For High produces oil or liquid.  Value of Authorized Transporter of Canighead Gas or Producing Fornation  For High produces oil or liquid.  Value of Authorized Transporter of Canighead Gas or Producing Fornation  For High produces oil or liquid.  Value of Authorized Transporter of Canighead Gas or Producing Fornation  For High produces oil or liquid.  Value of Authorized Transporter of Canighead Gas or Producing Fornation  For High produces of or liquid.  Value of Canighead Gas or Producing Fornation  For High producing Fornation of Producing Fornation  Date Conference or Liquid Authority of Producing Fornation  For High producing Fornation of Producing Fornation  Date Transporter of Canig	erator											
Section of Filing (Ched proport her?)  We Will Change in Transporter of Dry Gas   Dry	idress				1 a b a	7/,125						
ARCO OII and Gas Company. P.O. Box 1610. Midland. Texas. 79702  DESCRIPTION OF WELL AND LEAST.  DESIGNATION OF WELL AND LEAST.  Section 3 Township 30-N Range 6-W North-Holm Formation  Usin Letter 1 Referred to Fee Sure, Federal or Fee Spron The Sure Houseshoe Gallup	cason(s) for Filing (Check proper box)  ew Well  completion	Oil	Change in	Transpor Dry Gas	rter of:				,g Oi	1 Wel	l	
DESCRIPTION OF WELL AND LEASE MOTESCAPE GAILUP Unit  Velocities  V	change of operator give name ARCO	Oil an	d Gas	Compa	ny, P.	O. Box 1	610, Mid	land, Te	xas 797	702		
Unit Letter	DESCRIPTION OF WELL  EASE Name	ng Formation										
Section 3 Township 3 O-N Range [6-W , NMPM].  T. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS.  Imme of Authorized Transporter of Catainghead Gas or Condensate or Condensate or Condensate or Condensate or Catainghead Gas with that from any other tease or pool, give commissions or Gas another.  V. COMPLETION DATA  Designate Type of Completion - (X)  Out Well Gas Well Workover Deepa Pug Back Same Reav Diff Reavy  Designate Type of Completion - (X)  Out Gas Well Workover Deepa Pug Back Same Reav Diff Reavy  Designate Type of Completion - (X)  Out Gas Well Workover Deepa Pug Back Same Reav Diff Reavy  Tubing Casing And Catainghead Gas or Catainghead Gas Well Workover Deepa Pug Back Same Reav Diff Reavy  Tubing Casing And Catainghead Pug Back Same Reav Diff Reavy  Producing Method (Flow, pump, gas Igh, etc.)  Diff Casing Pressure  Cating Pressure  Cating Pressure  Chick Size  VI. OPERATOR CERTIFICATE OF COMPLIANCE Interest Condensate Market and Cataing Pressure (Shut-in)  Date Approved By  Date Approved  By	Unit Letter	18								East	Line	
Address (Give address to which approved copy of this form is to be sent)  Address (Give address to which approved copy of this form is to be sent)  Address (Give address to which approved copy of this form is to be sent)  (well produces oil or liquids.  When 7	Section 3 Townshi	30-	N	Range	16-V	√ , N	MPM,	San Juan		<del></del>	County	
West   production of liquids.   Unit   Sec.   Twp.   Rge.   Is gas actually connected?   When ?	I. DESIGNATION OF TRAN lame of Authorized Transporter of Oil	SPORTE	or Conde	IL AN	D NATU	Address (Giv	re address to wi	hich approved	copy of this j	form is to be se	ni)	
See   Twp.   Right   See   Right	talle of Additionized Transport of Company						Address (Give address to which approved copy of this form is to be sent)					
TUBING, CASING AND CEMENTING RECORD  HOLE SIZE  CASING & TUBING SIZE  Date First New Oil Rus To Task  Date of Test  Tubing Pressure  Casing Pressure  Casing Pressure  Casing Pressure  Casing Pressure  Casing Pressure  Casing Fressure  Casing Fr	ive location of tanks.	j						When	7			
Designate Type of Completion - (X)  Date Spudded  Date Compl. Ready to Prod.  Date Spudded  Date Compl. Ready to Prod.  Total Depth  P.B.T.D.  Depth Casing Shoe  TUBING, CASING AND CEMENTING RECORD  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  Tubing Pressure  Casing Pressure  Chapte CEIVE  Actual Frod. During Test  Oil - Bbls.  GAS WELL  Actual Frod. Test - MCF/D  Length of Test  Tubing Pressure (Shut-in)  Casing Pressure (Shut-in)  Casing Pressure (Shut-in)  Choke Size  OIL CONSERVATION DIVISION  Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.  By	this production is commingled with that	from any ot						Deepen	Plug Back	Same Res'v	Diff Res'v	
Depth Casing Shoe  TUBING, CASING AND CEMENTING RECORD  HOLE SIZE  CASING & TUBING SIZE  DEPTH SET  Name of Producing Formation  TUBING CASING AND CEMENTING RECORD  HOLE SIZE  CASING & TUBING SIZE  DEPTH SET  SACKS CEMENT  NAME OF PRODUCING METHOD AND REQUEST FOR ALLOWABLE  OIL WELL  (It set 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 of Test  Producing Method (Flow, pump, gas lift, stc.)  Date of Test  Tubing Pressure  Casing Pressure  CASING Pressure  CASING A TUBING SIZE  CODITIES CELVE  MARO 4 1991  Total Fred. Test. MCF/D  Length of Test  Biblis. Condensate/MMCF  Graving-Utacions. Difference (Shut-in)  VI. OPERATOR CERTIFICATE OF COMPLIANCE  I bereby certify that the rules and regulations of the Oil Conservation  Division have been complicated with and that the information given above is true and complete to the best of my knowledge and belief.  WARD A APPLICATION  Date Approved  By	Designate Type of Completion	- (X)	i	_i_		i	i	<u> </u>	P.B.T.D.	1	1	
TUBING, CASING AND CEMENTING RECORD  TUBING, CASING AND CEMENTING RECORD  HOLE SIZE  CASING & TUBING SIZE  DEPTH SET  SACKS CEMENT  HOLE SIZE  CASING & TUBING SIZE  DEPTH SET  SACKS CEMENT  Froducing Method (Flow, pump, gas lift, etc.)  Date of Test  Tubing Pressure  Casing Pressure  CASING Fressure  CASING B TUBING SIZE  DEPTH SET  SACKS CEMENT  SACKS CEMENT  SACKS CEMENT  CASING & TUBING SIZE  DEPTH SET  SACKS CEMENT  SACKS CEMENT  CASING B TUBING SIZE  DEPTH SET  SACKS CEMENT  CASING B TUBING SIZE  CASING Pressure  CASING PR	Tate Spudded					Ton Oil/Gas	Pay		Tubing De	oth .		
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HOLE SIZE  CASING & TUBING SIZE  DEPTH SET  SACKS CENTLIN  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.)  Producing Method (Flow, pump, gas lift, etc.)  Length of Test  Tubing Pressure  Casing Pressure (Shist-in)  Casing Pressure (Shist-in)  Conoke Size  VI. OPERATOR CERTIFICATE OF COMPLIANCE  I bereby certify that the rules and complete to the best of my knowledge and belief.  Date Approved  By  By			TUBING	, CASI	NG AND	CEMENT	ING RECO	RD	<u> </u>			
DIL WELL  (Test must be after recovery of total volume of toda on and must be expected by the first New Oil Run To Tank  Date of Test  Date of Test  Producing Method (Flow, pump, gas lift, etc.)  Casing Pressure  Casing Pressure  Childred Elive  Mar 0 4 1991  GAS WELL  Actual Prod. Test - MCF/D  Length of Test  Dist. 3  Testing Method (pitot, back pr.)  Tubing Pressure (Shut-in)  Casing Pressure (Shut-in)  Casing Pressure (Shut-in)  Casing Pressure (Shut-in)  OIL CONSERVATION DIVISION  Division have been complete to the best of my knowledge and belief.  Date Approved  By  By  Casing Pressure  Children  Choke Size  Choke Size  Date Approved  By	HOLE SIZE						DEPTH SET			SACKS CEMENT		
Date First New Oil Run To Tank  Date of Test  Casing Pressure  Casing Pressure  Casing Pressure  Children Casing Pressure  Casing Pressure (Shut-in)  Distr. 3  Testing Method (pitot, back pr.)  Tubing Pressure (Shut-in)  Casing Pressure (Shut-in)  Choke Size  OIL CONSERVATION DIVISION  Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.  Date Approved  By  By  Casing Pressure  Children  Choke Size  Choke Size  Choke Size  Choke Size  Choke Size  OIL CONSERVATION DIVISION  Date Approved  By												
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Actual Prod. During Test  Oil - Bbls.  Water - Bbls.  Gas WELL  Actual Prod. Test - MCF/D  Length of Test  Testing Method (pitot, back pr.)  Tubing Pressure (Shut-in)  Casing Pressure (Shut-in)  Choke Size  VI. OPERATOR CERTIFICATE OF COMPLIANCE  I bereby 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.  Date Approved  By  MAR 0 4 1991  MAR 0 4 1991  OIL CONSERVATION DIVISION  Date Approved  By  By	OIL WELL (Test must be after	recovery of	total volum	e of load	oil and mu	Producing N	Method (Flow, )	pump, gas lift,	etc.)	. y <u>j </u>		
GAS WELL  Actual Prod. Test - MCF/D  Length of Test  Tubing Pressure (Shut-in)  Testing Method (pitot, back pr.)  Tubing Pressure (Shut-in)  Tubing Pressure (Shut-in)  Casing Pressure (Shut-in)  Oll CONSERVATION DIVISION  Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.  Date Approved  Bbls. Condensate/MMCF  Casing Pressure (Shut-in)  Oll CONSERVATION DIVISION  Date Approved  By  By	Length of Test	Tubing F	Tubing Pressure				Casing Pressure			DECEIVE		
Testing Method (pitot, back pr.)  Tubing Pressure (Shut-in)  Tubing Pressure (Shut-in)  Casing Pressure (Shut-in)  Casing Pressure (Shut-in)  Choke Size  VI. OPERATOR CERTIFICATE OF COMPLIANCE  I hereby certify that the rules and regulations of the Oil Conservation  Division have been complete with and that the information given above is true and complete to the best of my knowledge and belief.  Date Approved  By	Actual Prod. During Test	Oil - Bbis.				Water - Bb	Water - Bbis.			MAR Q 4 1991		
Actual Prod. Test - MCF/D  Length of Test  Length of Test  Casing Pressure (Shut-in)  Casing Pressure (Shut-in)  Choke Size  VI. OPERATOR CERTIFICATE OF COMPLIANCE  I hereby certify that the rules and regulations of the Oil Conservation  Division have been complete with and that the information given above is true and complete to the best of my knowledge and belief.  Date Approved  By  By   Casing Pressure (Shut-in)  Choke Size  Choke Size  Dil CONSERVATION DIVISION  Date Approved  By						Ibble Cond	ensie/MMCF		Gravit	H.COI	4. DIV	
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	is true and complete to the best of the	ny knowledge	e and belief.	,								
Title Title	Linorah L. Gret	rnich	fradu	Title		Z.   Ta						
Printed Name   110   110   110   110   110   110   110   110   110   110   110   110	1-19-91		718-60	elephone	7/00	2						

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.