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Appropriate District Office
DISTRICT I
P O. Box 1920, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

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

OIL CONSERVATION DIVISION

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

DISTRICT III 1000 Rso Brazos Rd., Azzec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Apro of	land dag d	Company, Div. of Atlantic Richfi					Well	3004510298			
	and Gas C	ompany, o	14. 01 /	Attancie Ric	nileid Co.			30045	10298		
Address 1816 E.	Mojave, Pa	rmington,	New Me:	xico 87401							
Reason(s) for Filing (C						Other (Please expla	uin)				
New Well				Transporter of:		, - 	•				
Recompletion		Oil		Dry Gas]						
Change in Operator	<u> </u>	Camphe	ad Gas	Condensate							
If change of operator gir and address of previous	operator										
II. DESCRIPTIO	N OF WELL	L AND LE	ASE								
Lease Name			Well No. Pool Name, Includi			ng Formation		Kind of Lease		Lease No.	
HORSESH	DE GALLUP U	NIT	53	нон	SESHOE GAL	TOP	State,	Federal or Fee	14-20	-603-73	
Location Unit Letter	0	;	660	_ Feet From The	SOUTH	ine and	1980 F	et From The	EAST	Lir	
Section 3) Towns	hip 31N		Range 15W		NMPM,	SAN	JUAN		County	
III DEGLARA	ON OF 550 .	NGDODG									
III. DESIGNATION Name of Authorized To		NSPORTI	OF Conde			S Give address to wh	ich annemen	come of this form	is to he ee-	ut)	
	RANSPORTATI	L i				BOX 256 FAR	• •			-,	
Name of Authorized Tr				or Dry Gas		Give address to wi			is to be sen	at)	
	·				_						
If well produces oil or give location of tanks.	liquide,	Unit	Sec.	: :	- -	rally connected?	Whea	?			
If this production is con	mingled soth the	at from any a	her lease or	31N 16W		NO					
IV. COMPLETIC		any 04		poor, give conten	refined ounce in						
Designate Type	of Completio	n - (X)	Oil Wei	l Gas Wei		i	Deepen	Plug Back Sa	ime Res'v	Diff Resi	
Date Spudded		Date Com	ipl. Ready t	o Prod.	Total Dep	th .		P.B.T.D.			
Flores (DC 077)	rr co	h1	n	·	Top Oil/G	as Day		· · · · · · · · · · · · · · · · · · ·			
Elevations (DF, RKB, I	u , uk, <i>esc.)</i>	. Ivanne of	Producing F	Official Control of the Control of t	i up Owo	: 47		Tubing Depth			
Perforations								Depth Casing S	Shoe		
			TUBING	CASING A	ND CEMEN	TING RECOR	D				
HOLE S	SIZE			UBING SIZE		DEPTH SET		SA	CKS CEME	NT	
								In Si			
V. TEST DATA	-								5/ (5)/ *#**	د شفاد. د	
OIL WELL (I	<u>_</u>	Date of T		of load oil and s		or exceed top allo					
		Person 1	~ 5		1 towards	(z 1014) pa	 , <u></u>	—, AU	G () t la	JU	
ength of Test Tubing Pressure			Casing Pro	311831.C		Choke Size					
Actual Prod. During Te	ಷ	Oil · Bhis			Water - B	bis		Gas- MCF	Pitt.	<u> </u>	
- James (∪ μ · 5 013	-			· -					
GAS WELL											
Actual Prod. Test - MC	F/D	Length of	Test		Bbis. Con	densate/MMCF		Gravity of Con	densate	·· ····· ·	
Testing Method puor, t	ack pr.,	Tubing 2	ressure (Shi	u l-un)	Casing Pr	essure (Shut-in)		Choke Size			
						·		· 			
VI. OPERATO	R CERTIFI	CATE O	F COM	PLIANCE			וסכטי	ATION	N/1010	A.I.	
I hambu nastifu that	the rules and reg					OIL CON	49FHA	ATION D	11000	VIV.	
• •	comotied with as	ed that the info	•	ves above			, /	MIC U &	1000		
Division have been		v knowledoe			II 10~		d_{-} k	41117 110	1.3.30		
• •		y knowledge	and better.		L/E	ate Approve		1000	1000		
Division have been		y knowledge :	and belief.				A -	7	el	-	
Division have been	to the best of m	Cony	ñy	JPERVISOR	- By			Bu	el		
Division have been in true and complete	to the best of m	Cong	ñy	JPERVISOR Tale	- By	DENIE		AS INSPECTO	R DIST. #	13	
Division have been in true and complete in true and complete DAVID C	or the best of m	Cong	PROD SI (505)3			DENIE		AS INSPECTO	R, DIST. #	13	

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 with Rule 111.
- 2) 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.