DISTRIBUTION	NEW MEXICO OIL C	ONSERVATION COMMISSION	Form C -104	
SANTA FE		FOR ALLOWABLE	Form C-104 Supersedes Old C-104 and C-116	
FILE AND Effective 1-1-65				
U.S.G.S.	AUTHORIZATION TO TRA	INSPORT OIL AND NATURAL G	ASEIVED	
TRANSPORTER OIL		•		
GAS OF	-	٨	MAR 14 1979	
PRORATION OFFICE			!	
Operator ARCO 011 and Gas Company -			O. C. C.	
Division of Atlantic Richfield Company ARTESIA. OFFICE				
P. O. Box 1710, Hobbs, New Mexico 88240				
	Reason(s) for filing (Check proper box) Other (Please explain)			
New Well	Change in Transporter of:	Change in Operato	1	
Recompletion Change in Ownership	Oil Dry Ga: Casinghead Gas Conden	ETTECTIVE - T-I-V	9	
	Contract Contract			
If change of ownership give name and address of previous owner				
DESCRIPTION OF WELL AND I		ne, Including Formation	Kind of Lease	
Empire Abo Unit 6	20 Empi	re Abo	State, Federal or Fee State	
Location T 1/4	1-4	234	co.t	
Unit Letter;;	60 Feet From The South Line	e and <u>330</u> Feet From T	he	
Line of Section 36, Tow	mahip /75 Ronge &	27E , NMPM.	Eddy County	
SECONATION OF TRANSPORT	TER OF OUR AND NATURAL CA	A. A		
DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Cil or Condensate Address (Give address to which approved copy of this form is to be sent) 2300 Continental National Bank Bldg.				
Amoco Pipeline Company Ft. Worth, Texas 76102				
Name of Authorized Transporter of Cas. Amoco Production Compa	ny .	Address (Give address to which approved copy of this form is to be sent) P.O. Drawer A, Levelland, Texas 79336		
Phillips Petroleum Com	Unit Sec. Twp. Rge.	4001 Penbrook, Odessa,	Texas 79760	
If well produces oil or liquids, give location of tanks.	F 1 1 28	New	PP 1960	
If this production is commingled with that from any other lease or pool, give commingling order number:				
COMPLETION DATA Oil Well Gas Well New Well Workover Deepen Plug Back Same Resty. Diff. Resty.				
Designate Type of Completio	n – (X)	;		
Date Spudded	Date Compi. Ready to Prod.	Total Depth	P.S.T.D.	
No Change	Name of Producing Formation	Top Oil/Gas Pay .	Tubing Depth	
			·	
Perforations	d .		Depth Casing Shoe	
TUBING, CASING, AND CEMENTING RECORD				
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow-				
OIL WELL Date First New Oil Run To Tanks	Date of Test	pth or be for full 24 hours; Producing Method (Flow, pump, gas lif	i, etc.)	
No Change				
Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
Actual Prod. During Test	Cii-Bhls.	Water - Bbis.	Gas-MCF	
GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Candensate	
			davit, or condensate	
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size	
CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION		
I hereby certify that the rules and regulations of the Oil Conservation		APPROVED APR-1 9 1979 19		
Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		BY Will Dresset		
		CHDEDVISOD DICTRICTO		
Denze V. Rahs		This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepened		
(Signature)		well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.		
District Prod & Drlg St		All sections of this form mu	tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allow-	
3 8 79 (Title)		able on new and recompleted wells. Fill out Sections I. II. III. and VI only for changes of owner.		

(Date)

Fill out Sections I. II, III, and VI only for changes 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