NO. OF COPIES RECEIVED			
DISTRIBUTION SANTA FE		INSERVATION COMMISSION	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65
FILE / 4		AND	•
U.S.G.S.	AUTHORIZATION TO TRAI	NSPORT OIL AND NATURAL	
OIL 1	4	R	
RANSPORTER GAS			SEP 2 6 1973
OPERATOR /	-		SEP 2 0 1375
PRORATION OFFICE	1		0. C. C.
Atlantic Richfield Com	ipany		ARTESIA, OFFICE
Address			
P. O. Box 1710, Hobbs, Reason(s) for filing (Check proper box		Other (Please explain)	
'iew Weil	Change in Transporter of:	Included in Emp:	ire Abo Unit eff:10/01/73.
Recompletion	Oil Dry Gas Casinchead Gas Conden		name from State "A" #34;
Thurse in Cwnership, X.			
If change of ownership give name and address of previous owner	Hondo Oil & Gas Comp	any, P. O. Box 1710, H	obbs, New Mexico 88240
11. DESCRIPTION OF WELL AND	LEASE Weil No. Pool Nar	me, Including Fermation	Kind of Lease
Empire Abo Unit D	43	Empire Abo	State, Federal or Fee State
- Location		e and 990 Feet From	n The South
Unit Letter 0 ; 2	2310 Feet From The <u>East</u> Lin	e and <u> </u>	
Line of Section $25$ , To	wnship 17S Range	28E , NMPM,	Eddy County
1		c	
II. DESIGNATION OF TRANSPOR	TER OF GIL AND NATURAL GA	I Address (Gree muness to when app	roved copy of this form is to be sent)
AMOCO Pipe Line Company	ny .	2300 Continental Bk Fort Worth, TX 76102	Bldg.
0% AMOCO Production Company	isinghead Gas 🔀 🛛 or Dry Gas 🔄	D O Box 68 Hobbs.	roved copy of this form is to be sent) New Mexico 88240
0% Phillips Petroleum Com	Dany Unit Sec. Twp. Rge.	Phillips Bldg., 4th &	Washington,Odessa,TX 79760 When AMO 10/06/60
If well produces oil or liquids, give location of tanks.	P 26 17S 28E	Yes	PP 10/06/60
If this production is commingled w	ith that from any other lease or pool,	give commingling order number:	
IV. COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.
Designate Type of Completi			
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
	Name of Producing Formation	Top Oll/Gas Pay	· Tubing Depth
Fool	Name of Producing . ofmation		
Perferations			Depth Casing Shoe
	TUDING CASING AN	D CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
V. 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	able for this a	lepth or be for full 24 hours) Producing Method (Flow, pump, ga	s lift, etc.)
Date Fitst New Oil Run To Tanks			
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
		Water-Bbis.	Gas-MCF
Actual Prod. During Test	Oil•Bbls.	Wallel - Bors.	
·			
GAS WELL			Gravity of Condensate
Actual Fred. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of containsate
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size
VI. CERTIFICATE OF COMPLIA	NCE	OIL CONSER	RVATION COMMISSION
	i constructions of the Oil Conservation	A D D D D L C D	1975 
Commission have been complied	nd regulations of the Oil Conservation d with and that the information gives		gresset
above is true and complete to	the best of my knowledge and belief	0 0 AND CAO INC	PECTOR
· · · <b>-</b> ·			
no li	1 PL. A		in compliance with RULE 1104. Illowable for a newly drilled or deepene
_ Der. She	ignature)	_ If this is a request for a well, this form must be acco tests taken on the well in a	
Senior Accoun		tests taken on the well in a All sections of this form	n must be filled out completely for allow
	(Title)	able on new and recomplete	d wells.
September	(Date)	well name or number, or tran	III, and VI only for changes of owner sporter, or other such change of conditior
	(- · · · · /	Separate Forms C-104 completed wells.	must be filed for each pool is multipl
		· ·······	

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## Job separation sheet

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DISTRIBUTION SANTA FE	NEW MEXICO OIL	CONSERVATION CC. 4	SSION	Form C-104	
FILE	REQUES	T FOR ALLOWABLE	•	Supersedes Old Effective 1-1-6	
U.S.G.5.	AUTHORIZATION TO TR	AND ANSPORT OIL AND N	ATURAL GAS		-
LAND OFFICE			n F C	EIVED	)
TRANSPORTER GAS					
OPERATOR			101	281971	
PRORATION OFFICE		·····			
Hondo Oil & Gas Com	pany ·		<u>ل</u>	J. G. C.	
Address			A		
P. O. Box 1978, Ros Reason(s) for filing (Check proper		Other (Please	erolain	· · · · · · · · · · · · · · · · · · ·	····-
New Well	Change in Transporter of:	Change i	in operator n	ame from H	ondo
Recompletion Change in Ownership			ional Yates ve 6-18-71.		
	Casinghead Gas Cond	ensate Effectiv	/// 0-18-/1.	·····	
f change of ownership give nam and address of previous owner_		·			
		·			
DESCRIPTION OF WELL AN Lease Name	U LEASE Well No. Pool Name, Including	Formation	Kind of Lease		Lease No
State "A"	34-Y Empire Abo		State, Federal or Fee	State	647
Location 0 2	310 Elest	990		0+1	
Unit-Letter;;	310 Feet From The East	ine and	_ Feet From The	South	<del></del>
Line of Section 25	Township 17S Range	28E , NMPM,	Eddy		County
DECICIANTON OF THE ANERG	NTED OF OU AND MATHDAY O	10			
Name of Authorized Transporter of	ORTER OF OIL AND NATURAL G	Address (Give address to	which approved copy	of this form is to	be sent)
Amoco Pipeline Comp		3411 Knoxville			413
Name of Authorized Transporter of 50% Amoco Production	Casinghead Gas 🔏 🛛 or Dry Gas 🦳 – n Company	Address (Give address to P. O. Box 68, H	lobbs, New Me:	xico 8824	0 .
50% Phillips Pipeli If well produces oil or liquids,	Unit Sec. Twp. Pge.	Phillips Bldg. Is gas actually connected	4th & Washing	$\frac{\text{gton, Odes}}{10-6-60}$	sa. Tex.
give location of tanks.	P 26 17S 28E	Yes	PP 10-	10-6-60 6-60	
	with that from any other lease or pool	, give commingling order	number:		۱
COMPLETION DATA	Oil Well Gas Well	New Well Workover	Deepen Plug E	Back   Same Res	v. Diff. Res
Designate Type of Comple	l		i   	I	1 1 1
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T	.D.	
Elevations (DF, RKB, RT, GR, etc.	j Name of Producing Formation	Top Oll/Gas Pay	Tubine	g Depth	
				· ·	
				Casing Shoe	
Perforations			. Depin		
Perforations	TUBING, CASING, AN	D CEMENTING RECORD	·		
Perforations HOLE SIZE	TUBING, CASING, AN CASING & TUBING SIZE	D CEMENTING RECORD		SACKS CEM	ENT
· · · · · · · · · · · · · · · · · · · ·	******	······································			ENT
· · · · · · · · · · · · · · · · · · · ·	******	······································			ENT
HOLE SIZE	CASING & TUBING SIZE	DEPTH SE	г	SACKS CEM	
· · · · · · · · · · · · · · · · · · · ·	CASING & TUBING SIZE	······································	г	SACKS CEM	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SE	r e of load oil and must	SACKS CEM	
HOLE SIZE TEST DATA AND REQUEST DIL WELL Date First New Oil Run To Tanks	CASING & TUBING SIZE FOR ALLOWABLE (Test must be a able for this d Date of Test	DEPTH SE DEPTH SE after recovery of total volum epth or be for full 24 hours) Producing Method (Flow,	e of load oil and must pump, gas lift, etc.)	SACKS CEM be equal to or e:	
HOLE SIZE TEST DATA AND REQUEST DIL WELL	CASING & TUBING SIZE FOR ALLOWABLE (Test must be able for this d	DEPTH SE DEPTH SE dier recovery of total volum ep:h or be for full 24 hours)	r e of load oil and must	SACKS CEM be equal to or e:	
HOLE SIZE TEST DATA AND REQUEST DIL WELL Date First New Oil Run To Tanks	CASING & TUBING SIZE FOR ALLOWABLE (Test must be a able for this d Date of Test	DEPTH SE after recovery of total volum epth or be for full 24 hours) Producing Method (Flow,	e of load oil and must pump, gas lift, etc.)	SACKS CEM be equal to or e: Size	
HOLE SIZE TEST DATA AND REQUEST DIL WELL Date First New Oll Run To Tanks Length of Test	CASING & TUBING SIZE FOR ALLOWABLE (Test must be able for this d Date of Test Tubing Pressure	DEPTH SE after recovery of total volum epth or be for full 24 hours) Producing Method (Flow, Casing Pressure	e of load oil and must pump, gas lift, etc.) Choke	SACKS CEM be equal to or e: Size	
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HOLE SIZE TEST DATA AND REQUEST DIL WELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test	CASING & TUBING SIZE FOR ALLOWABLE (Test must be able for this d Date of Test Tubing Pressure	DEPTH SE after recovery of total volum epth or be for full 24 hours) Producing Method (Flow, Casing Pressure	e of load oil and must pump, gas lift, etc.) Choke Gas-h	SACKS CEM be equal to or e: Size	
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