

NO. OF COPIES RECEIVED		2
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	/
	GAS	
OPERATOR		/
PRORATION OFFICE		

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-110
Effective 1-1-65

I. Operator **Arwood, Ltd.**
Address **Box 20200 Dallas, Texas 75220**
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)
**CASINGHEAD GAS MUST NOT BE
FLOWED AFTER 3-17-72
UNLESS AN EXCEPTION TO R-4070
IS OBTAINED**
61, 2-63 1-31-72
If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE
Lease Name **Loe Natural** Well No. **9** Pool Name, including Formation **Square Lake** Kind of Lease **Federal** Lease No. **NM 07781**
Location
Unit Letter **M** **990** Feet From The **south** Line and **330** Feet From The **west**
Line of Section **30** Township **16S** Range **31E**, NMPM, **Eddy** County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil ☒ or Condensate ☐ Address (Give address to which approved copy of this form is to be sent)
Navajo Refing Co. Pipe Line Div. **Artesia, New Mexico**
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐ Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks. Unit **K** Sec. **30** Twp. **16** Rge. **31** Is gas actually connected? When

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)	<input checked="" type="checkbox"/> Oil Well	<input type="checkbox"/> Gas Well	<input checked="" type="checkbox"/> New Well	<input type="checkbox"/> Workover	<input type="checkbox"/> Deepen	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Same Res'v.	<input type="checkbox"/> Diff. Res'v.
Date Spudded 1-1-72	Date Compl. Ready to Prod. 1-17-72	Total Depth 3260	P.B.T.D. 3238					
Elevations (DF, RKB, RT, GR, etc.) 3856' GR	Name of Producing Formation Premier & Lovington	Top Oil/Gas Pay 3038	Tubing Depth 3204					
Perforations 3038-43; 3082-88; 3216-24			Depth Casing Shoe 3260					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
10 3/4	8 5/8	24#	425'		185 sx Circ			
6 1/4	5 1/2	14#	3260'		300 sx			
	2"	4.7#	3204					

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 1-17-72	Date of Test 1-23-72	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24	Tubing Pressure 0	Casing Pressure 0	Choke Size 2"
Actual Prod. During Test 105	Oil-Bbls. 75 oil	Water-Bbls. 30 water	Gas-MCF TSTM

GAS WELL 36.74 acrs. faster 5775	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	

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.

OIL CONSERVATION COMMISSION

APPROVED **JAN 23 1972**, 19____
BY **W. A. Grewett**
TITLE **OIL AND GAS INSPECTOR**

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation 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 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

B. F. Hone
(Signature)
Supt
(Title)
1-26-72
(Date)