DISTRIBUTION	NEW MENIOD OU	CONCERNATION	_
SANTA FE		CONSERVATION COMMISSION TOR ALLOWABLE	Form C-104 Supersedes Old C-104 and C-11
FILE	, REGOLS	AND	Effective 1-1-65
u.s.g.s.	AUTHORIZATION TO T	RANSPORT OIL AND NATURAL O	ΔS
LAND OFFICE		THE SEL ME HATORAL C	
TRANSPORTER GAS 2			PEDEIVED
OPERATOR / PRORATION OFFICE	-		MAR 14 1979
Operator ARCO Oil and Ga			D. C. C.
Address DIVISION OF AC.	lantic Richfield Compar	ny	ARTESIA, OFFICE
	, Hobbs, New Mexico 882		
Reason(s) for filing (Check proper box)	Change in Transporter of:	Other (Please explain)	
Recompletion	<u></u>	Change in Operat	
Change in Ownership		Gas effective: 4-1-7	9
If change of ownership give name and address of previous owner DESCRIPTION OF WELL AND	I FASE		
Lease Name	Well No. Pool	Name, Including Formation	Kind of Lettse
Empire Abo Unit "H"	271 Em	pire Abo	State, Federal or Fee State
Unit Letter 0; 14:	50 Feet From The East	Line and 330 Feet From T	no South
Line of Section 32 , Tow	mship /75 Range	28E , NMPM,	Eddy County
BECIEWATION OF TRANSPORT	TER OF OUT AND MARKINAL	g.g	
DESIGNATION OF TRANSPORT Name of Authorized Transporter of Cil	or Condensate	Address (Give address to which approved 2300 Continental Nation	ed copy of this form is to be sent; al Bank Bldg.
Amoco Pipeline Company Name of Authorized Transporter of Cas	runghead Gas 😨 or Dry Gas 🦳	Ft. Worth, Texas 76102 Address (Give address to which approv	ed cany of this form is to be sens!
Amoco Production Compa Phillips Petroleum Com	iny . ipany	P.O. Drawer A, Levellan 4001 Penbrook, Odessa,	d, Texas 79336 Texas 79760
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. 0 32 175 28	E yes A	no 4 PP 6-17-75
If this production is commingled wit COMPLETION DATA	th that from any other lease or poo	ol, give commingling order number	·
Designate Type of Completion	on - (X) Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.
Date Spudded No Change	Date Compl. Ready to Prod.	, Total Depth	P.B.T.D.
Pool .	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Perforations			Depth Casing Shoe
		-	
LOI P CITE		IND CEMENTING RECORD	CACKS OFFICE
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
, 1864 - 1864 - 18			
TEST DATA AND REQUEST FOOLL WELL	able for this	e after recovery of total volume of load oil o depth or be for full 24 hours;	
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lif	i, etc.)
No Change Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Langth of Teat	. ubing Present	County Francisco	
Actual Prod. During Test	Oll-Bhis.	Water-Bbls.	Gas-MCF
CACHTEL	1	<u> </u>	1
GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
		, , , , , , , , , , , , , , , , , , , ,	
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size
CERTIFICATE OF COMPLIANCE	CE	OIL CONSERVA	TION COMMISSION
Thereby contify that the sules and regulations of the Oil Consequation		APPROVED APR 1,2	

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.

District Prod & Drlg Supt.

T.

(Title)

(Date)

This form is to be filed in compliance with RULE 1104.

W.a. Dresset

SUPERVISOR, DISTRICT II

TITLE _

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 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