	·			/
	DISTRIBUTION		. 6	
	SANTA FE			
	FILE		/	V
	u.s.g.s.			
	LAND OFFICE			
	TRANSPORTER	OIL		
		GAS	2	
	OPERATOR			
r.	PRORATION OFFICE			
	Operator AD Co			

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWARI F

Form C-104 Supersedes Old C-104 and C-110

FILE	- KEQUESI	FOR ALLOWABLE	Effective 1-1-65				
u.s.g.s.	AUTHORIZATION TO TRA	AND NSPORT OIL AND NATURAL (AC				
LAND OFFICE	AUTHORIZATION TO TRA	MISPORT OIL AND NATURAL C	5A3				
TRANSPORTER OIL]						
GAS 2			RECEIVED				
OPERATOR /	-	•					
PRORATION OFFICE			887111111111111111111111111111111111111				
Operator ARCO Oil and G			MAR 14 1979				
Division of At	lantic Richfield Company						
	, Hobbs, New Mexico 8824	n	O. C. C.				
Reason(s) for filing (Check proper box		Other (Please explain)	ARTESIA, OFFICE				
New Weil	Change in Transporter of:	Change in Operat	or Name				
Recompletion	Oil Dry Ga	F - 1					
Change in Ownership	Casinghead Gas Conden	sate	· .				
If change of ownership give name							
If change of ownership give name and address of previous owner							
BESONIE OF WELL AND		•					
- DESCRIPTION OF WELL AND	LEASE Weil No. Pool Na	me, Including Formation	Kind of Lease				
Empire Abo Unit "H"	222	re Abo	State, Federal or Fee				
Location	101161 111101	10 100	- sac				
Unit Letter 0 : 248	7/ Feet From The East Lin	e and 330 Feet From	me South				
Unit Letter U; 48/ Feet From The CALC Line and 330 Feet From The DALL							
Line of Section 32 , Township /75 Range 28E , NMPM, Eddy County							
	TER OF OIL AND NATURAL GA	S A					
Name of Authorized Transporter of Cit		Address (Give address to which appropriate 2300 Continental Nation					
Amoco Pipeline Compani	y singhead Gas (V) or Dry Gas (T)	Ft. Worth, Texas 76102 Address (Give address to which appro-					
Amoco Production Compa	any .	P.O. Drawer A. Levellar	nd, Texas 79336				
Phillips Petroleum Co	Unit Sec. Twp. Ege.	4001 Penbrook, Odessa, Is gas actually connected?					
If well produces oil or liquids, give location of tanks.	0 32 17 28	ues a	mo4PP 7-19-77				
If this production is commingled wi	th that from any other lease or pool,		di Kadada isanda di sada sada da 				
COMPLETION DATA	that non any other roads or poor,	Brio comminging order number.					
Designate Type of Completic	Cil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.				
	<u></u>	1 1	1				
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.				
No Change	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth				
F-001	terms of Producted consisting	Top On/ Gue Pay	. wand pahen				
Perforations		1	Depth Casing Shoe				
	TUBING, CASING, AND	CEMENTING RECORD					
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT				
		ļ					
	OD AVIOUANTS		4				
- TEST DATA AND REQUEST F OIL WELL	UR ALLUWABLE (Test must be a able for this de	fter recovery of total volume of load oil oth or be for full 24 hours;	and must be equal to or exceed top allow-				
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas li	ft, etc.)				
No Change							
Length of Test	Tubing Pressure	Casing Pressure	Choke Size				
		<u> </u>					
Actual Prod. During Test	Oil-Bbls.	Water - Bbis.	Gas - MCF				
<u> </u>		<u> </u>					
CAS WELL							
GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate				
133.75			or odingitaria				
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size				
1							
L CERTIFICATE OF COMPLIAN	CE	OIL CONSERVATION COMMISSION					
		ADD 1 0 some					
	regulations of the Oil Conservation	APPROVED APR 1 2 1979 , 19					
Commission have been complied	with and that the information given	By W. a. Tressett					
-		TITLE SUPERVISOR, D	TITLE SUPERVISOR, DISTRICT II				
11 .12		This form is to be filed in	This form is to be filed in compliance with RULE 1104.				
Denze 1. Kra	ks	If this is a request for allowable for a newly drilled or deepened					
./	nature)	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 S		All sections of this form must be filled out completely for allow-					
$oldsymbol{3}$ 8 79 $^{\sigma_0}$	isle)	able on new and recompleted wells.					
\ \ \		Fitt out Sections I II III					

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 Separate Forms C-104 must be filed for each pool in multiply completed wells.