

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

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Form C-104  
Revised 10-01-78  
Format 08-01-83  
Page 1

FEB 19 '88

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

O. C. D.  
ARTESIA, OFFICE

I. Operator ARCO OIL AND GAS COMPANY ✓  
Division of Atlantic Richfield Company

Address P.O. Box 1710 Hobbs, New Mexico 88240

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	<input checked="" type="checkbox"/> Condensate
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	

Other (Please explain) Effective 3-1-88

If change of ownership give name  
and address of previous owner \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>State BV</u>	Well No. <u>1</u>	Pool Name, including Formation <u>S. Empire Morrow Gas</u>	Kind of Lease <u>State, Federal or Fee State</u>	Lease No. <u>647</u>
Location Unit Letter <u>J</u> : <u>1800</u> Feet From The <u>S</u> Line and <u>1980</u> Feet From The <u>E</u> Line of Section <u>25</u> Township <u>17S</u> Range <u>28E</u> , NMPM, <u>EDDY</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> <u>KOCH Oil Co. Div of Koch Ind. Inc.</u>	Address (Give address to which approved copy of this form is to be sent) <u>P.O. Box 1558 Breckenridge, Texas 76024</u>	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> <u>Phillips Petroleum Co</u> <u>El Paso Natural Gas Co.</u>	Address (Give address to which approved copy of this form is to be sent) <u>4001 Penbrook, Odessa, Texas 79760</u> <u>Box 1384 Jal, New Mexico 88252</u>	
If well produces oil or liquids, give location of tanks.	Unit <u>J</u>	Sec. <u>25</u>
	Twp. <u>17S</u>	Rge. <u>28E</u>
	Is gas actually connected? <u>YES</u> When <u>1-29/78</u>	

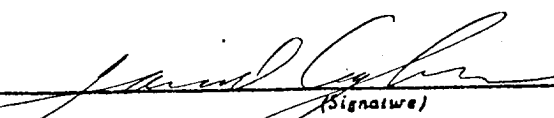
*2-26-88 chg NT PWK*

If this production is commingled with that from any other lease or pool, give commingling order number: \_\_\_\_\_

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

  
(Signature)  
Services Supervisor  
(Title)  
February 17, 1988  
(Date)

OIL CONSERVATION DIVISION

APPROVED FEB 24 1988, 19\_\_\_\_  
BY Original Signed By  
Mike Williams  
TITLE Oil & 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 completed wells.