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| TRANSPORTER | OIL / GAS // |
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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

RECEIVED

MAY 18 1978

I. Operator
Atlantic Richfield Company ✓
Address
P. O. Box 1710, Hobbs, New Mexico 88240
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)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|---|----------|--------------------------------|-----------------------|--------|
| Lease Name | Well No. | Pool Name, Including Formation | Kind of Lease | State |
| Empire Abo Unit "E" | 361 | Empire Abo | State, Federal or Fee | E-7832 |
| Location Unit Letter A ; 620 Feet From The North Line and 1200 Feet From The East Line of Section 34 , Township 17S Range 28E , NMPM, Eddy County | | | | |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| | | | | | | |
|--|--|------|------|------|----------------------------|---------|
| Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) | | | | | |
| Amoco Pipeline Company | 2300 Continental Bank Bldg, Ft Worth, TX | | | | | |
| Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) | | | | | |
| Amoco Production Company Phillips Petroleum Company | Drawer A, Levelland, TX Phillips Bldg, 4th & Washington, Odessa, TX | | | | | |
| If well produces oil or liquids, give location of tanks. | Unit | Sec. | Twp. | Rge. | Is gas actually connected? | When |
| | F | 34 | 17S | 28E | Yes | 5/16/78 |

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) | Oil Well | Gas Well | New Well | Workover | Deepen | Plug Back | Same Res'v. | Diff. Res'v. |
| | X | | X | | | | | |
| Date Spudded | Date Compl. Ready to Prod. | | Total Depth | | P.B.T.D. | | | |
| 4/12/78 | 5/10/78 | | 6236' | | | | | |
| Pool | Name of Producing Formation | | Top Oil/Gas Pay | | Tubing Depth | | | |
| Empire Abo | Abo Reef | | 6169' | | 6236' | | | |
| Perforations | | | | | Depth Casing Shoe | | | |
| Open Hole 6169-6236' | | | | | 6169' | | | |
| TUBING, CASING, AND CEMENTING RECORD | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | | DEPTH SET | | SACKS CEMENT | | | |
| 11" | 8-5/8" OD | | 750 | | 600 sx + 3 yds Redi-mix | | | |
| 7-7/8" | 5-1/2" OD | | 6169' | | 1120 sx | | | |
| | 2-3/8" OD | | 6236' | | | | | |

V. 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 | Date of Test | Producing Method (Flow, pump, gas lift, etc.) | |
| 5/10/78 | 5/13/78 | Flow | |
| Length of Test | Tubing Pressure | Casing Pressure | Choke Size |
| 24 hrs | 125# | Pkr | 48/64" |
| Actual Prod. During Test | Oil-Bbls. | Water-Bbls. | Gas-MCF |
| 244 bbls | 244 bbls | 0 | 164 |

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 |
| | | | |

VI. 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.

Accountant I
5/17/78
(Signature)
(Title)
(Date)

OIL CONSERVATION COMMISSION

APPROVED JUN - 1 1978
BY W. A. Gessert
TITLE SUPERVISOR, DISTRICT II

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 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 completed wells.