CISTRIBUTION SANTA FE	1			SERVATION		Form C-104 Supersedes Old C-104 and C-110			
FILE	1/1	•	A	ND		Effective 1-1-65			
LAND OFFICE					NSPORT OIL AND NATURAL GAS				
					ĸ	ECEIVED			
G	AS 2		-		•	MAD 1 4 1070			
L PRORATION OFFICE						MAR 1 4 1979			
		as Company -			· · · · · · · · · · · · · · · · · · ·	O. C. C.			
JIVIS1 Address	on or Atl	Lantic Richfield Com	pany			RTEBIA, OFFICE			
		Hobbs, New Mexico	88240						
Reason(s) for filing (Che	ck proper box)	Change in Transporter of:			(Please explain) inge in Opera	tor Name			
Recompletion		· · · ·	Dry Gas		ective: 4-1-	1			
Change in Ownership		Casinghead Gas	Condensate			·			
If change of ownership									
and address of previous	owner		· · · ·	·····		······································			
I. DESCRIPTION OF W	ELL AND I		ool Name, 1	ncluding For	mation	Kind of Lease			
Empire Abo Un	it F		Empire	-	:	State, Federal or Fee State			
Location	241		1	2350		e +			
Unit Letter	<u> </u>	Feet From The NOV	4_Line an	1_72	70 Feet From	The <u>Cast</u>			
Line of Section	74 , Tow	mship 175 Rang	<u>.</u> 2	8E	, NMPM,	Eddy County			
L DESIGNATION OF 1 Name of Authorized Tran		CER OF OIL AND NATURA		tress (Give a	ddress to which appro	oved copy of this form is to be sent)			
Amoco Pipelin	<u>e Company</u>	,	Ft			adress (Give address to which approved copy of this form is to be sent) 2300 Continental National Bank Bldg. Ft. Worth, Texas 76102			
Name of Authorized Tran Amoco Product	ion Compa	ny .		.O. Drawe	er A, Levella	nd, Texas 79336			
The second secon				gas actually	connected?	Texas 79760			
give location of tanks.		F 34 17 à	28	- ye		3-2-77			
2. COMPLETION DATA	<u> </u>	h that from any other lease or Oil Weil Gos V			rkover Deepen	Plug Back Same Res'v. Diff. Res'v.			
Designate Type o	f Completio	i							
Date Spudded No Change		Date Compl. Ready to Prod.	. To	tal Depth		P.B.T.D.			
Pool		Name of Producing Formation	To	p Oll/Gas Pa	Ŷ	Tubing Depth			
Perierations		L				Depth Casing Shoe			
Pericialians		•	-		· · ·				
		TUBING, CASING	G, AND CE	MENTING I	RECORD				
HOLE SIZ	E	CASING & TUBING SIZ	E	DE	PTH SET	SACKS CEMENT			
				<u> </u>					
	·····	1							
T TEST DATA AND B	FOUEST E	D ALLOWARTE (Test -	<u> </u>		al well we of lead of				
7. TEST DATA AND R OIL WELL	-		this depth	or be for full :	24 hours;	l and must be equal to or exceed top allow-			
Date First New Oil Run	To Tanks	Date of Test	Pr	sducing Metho	oà (Flow, pemp, gas l	ift, etc.)			
No Change Length of Test		Tubing Pressure	Ca	sing Pressure	•	Choke Size			
				the Phile		Gas-MCF			
Actual Prod. During Tes	t .	Oil-Bhis.	, wa	ter-Bbis.					
t		<u>I</u>		·					
GAS WELL Actual Prod. Test-MCF		Length of Test		is. Condensa		Gravity of Condensate			
Actual Plots Test-MCF									
Testing Method (pitot, b	ack pr.)	Tubing Pressure	Ca	sing Pressure	•	Choke Size			
L CERTIFICATE OF	JUMPLIAN	, E .			APR 1	ATION COMMISSION			
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.				APPROVED					
				BY W, U, Messet					
• 🗕 •			Н т		SUPERVISOR, D	ISTRICT II			
μ μ				This form is to be filed in compliance with RULE 1104.					
Denzell Richs				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					
(Signature) District Prod & Drlg Supt.				tests taken on the well in accordance with RULE 111.					
3 8 79 (Title)				All sections of this form must be filled out completely for allow- able on new and recompleted wells.					
(Date)				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.					

Fill out Sections L. II, III, and VI only for changes of owner, well name of number, or transporter, or other such change of condition. Separate Forms C-104 must be filed for each pool in multiply