CISTRIBUTION SANTA FE		CONSERVATION COMMISSION FOR ALLOWABLE AND	Form C-104 Supersedes Old C-104 and C-1 Effective 1-1-65
U.S.G.S.	AUTHORIZATION TO TR	ANSPORT OIL AND NATURAL	
OPERATOR /			RECEIVED
CPECTATION OFFICE /	Gas Company -		MAR 1 4 1979
	Atlantic Richfield Company	1	
	LO, Hobbs, New Mexico 8824	÷0	O. C. C.
Reason(s) for filing (Check proper b New Weil Recompletion Change in Ownership	Change in Transporter of: Oil Dry G Casinghead Gas Conde	as Change in Opera effective: 4-1-	
If change of ownership give name and address of previous owner	•	·	
DESCRIPTION OF WELL AN	DLEASE		•
Lease Name Empire abo U	mit B 47 Er 310 Foot From The North Lt	me, Including Formation <u> <u> <u> </u> <u> </u></u></u>	Kind of Lease State, Federal or Fee Jeleral
	•		a The <u>Case</u>
Line of Section 30	Township 775 Range	29E , NMPM,	County County
DESIGNATION OF TRANSPO	RTER OF OIL AND NATURAL GA		roved copy of this form is to be sent)
amoro Qual	Casinghead Gas 2 0 or Dry Gas	2300 Intinental Nath Address (Give address to which appr PO Drowner A, Sen 4001 Penhrost	ank BODA, It Worth Tr 761
If well produces oil or liquids, give location of tanks.	Unit Sec. Cop. Ree. P 26 17 28		hen Amo 5-25-62
	with that from any other lease or pool,		pp == Unknown
Designate Type of Comple		New Well Workover Deepen	Plug Back Same Restv. Diff. Rest
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
No Change Pool	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Perforations			Depth Casing Shoe
	THRING CARING AN		
+ HOLE SIZE	CASING & TUBING SIZE	D CEMENTING RECORD	SACKS CEMENT
· · · · · · · · · · · · · · · · · · ·	•	· · · · · · · · · · · · · · · · · · ·	
TEST DATA AND REQUEST OIL WELL		after recovery of total volume of load of epth 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	Producing Method (Flow, pump, gas	lift, etc.)
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oii - Bbis.	Wat er - Bbl s.	Gas-MCF
GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure	Cosing Pressure	Choke Size
CERTIFICATE OF COMPLIA	NCE		ATION COMMISSION
I hereby certify that the rules an Commission have been complied	d regulations of the Oil Conservation i with and that the information given the best of my knowledge and belief.	APPROVED APR 1	2/1979, 19
·		TITLE SUPERVISOR, DI	STRICT IL
Denze 1. Richs (Signature)		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	
(Si	gnature)		
District Prod & Drlg		tests taken on the well in acc	ordance with RULE 111. ust be filled out completely for allow

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