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	CISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE IRANSPORTER OIL	REQUEST	CONSERVATION COMMISSION FOR ALLOWABLE AND ANSPORT OIL AND NATURAL	Form 0-104 Supersedes Old C-104 and C-11 Effective 1-1-65 GAS	
Ι.	OPERATOR / PROBATION OFFICE Creatur ARCO Oil and O			RECEIVED	
	Division of Atlantic Richfield Company			MAR 1.4 1979	
	P. O. Box 1710 Reason(s) for filing (Check proper bos tiew well Hecompletion Chan je in Ownership	Change in Transporter ct:  Oil Dry G	Other (Please explain)  Change in Opera	ator Name n.C.C.	
	If change of ownership give name and address of previous owner				
11.	DESCRIPTION OF WELL AND		ame, Including Formation	Kind of Lease	
	J.L. Keel "A	" 2 Dra	ybug Jackson	State, Federal or Fee Falana	
	Unit Letter / ; 47	Peet From The South Li	the and $470$ Feet From $3/E$ , NMPM,	The Scunty	
		TER OF OIL AND NATURAL G		7	
111.	Name of Authorized Transporter of Of		Address (Give address to which app	roved copy of this form is to be sent)  79701  roved copy of this form is to be sent)	
	Continental Dipe	Unit Sec. Two. Fige.	Bol 2197 House is gas actually conjected?	ton, letas 77001	
	If well produces off or figures, give location of tanks.	B 7 17 31	Yea	6-3-60	
	If this production is commingled with that from any other lease or pool, give commingling order number:  COMPLETION DATA  Cli Well Gas Well New Well Workover Deepen Plug Back Same Resty. Diff. Resty.				
	Designate Type of Completi		!		
	No Change	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	Pool	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
	Perforations			Depth Casing Shoe	
	TUBING, CASING, AND CEMENTING RECORD				
		TUBING, CASING, AN	ID CEMENTING RECORD		
	HOLE SIZE	TUBING, CASING, AN	DEPTH SET	SACKS CEMENT	
	HOLE SIZE			SACKS CEMENT	
	HOLESIZE			SACKS CEMENT	
		CASING & TUBING SIZE	DEPTH SET		
v.	TEST DATA AND REQUEST FOIL WELL	CASING & TUBING SIZE  FOR ALLOWABLE (Test must be able for this a	DEPTH SET  After recovery of total volume of load of lepth or be for full 24 hours)	il and must be equal to or exceed top allow-	
v.	TEST DATA AND REQUEST FOR WELL Date First New Off Bun To Tanks	CASING & TUBING SIZE  FOR ALLOWABLE (Test must be	DEPTH SET	il and must be equal to or exceed top allow-	
V.	TEST DATA AND REQUEST FOIL WELL	CASING & TUBING SIZE  FOR ALLOWABLE (Test must be able for this a	DEPTH SET  After recovery of total volume of load of lepth or be for full 24 hours)	il and must be equal to or exceed top allow-	
V.	TEST DATA AND REQUEST FOIL WELL Date First New Off flun To Tanks No Change	CASING & TUBING SIZE  FOR ALLOWABLE (Test must be able for this a	after recovery of total volume of load of lepth or be for full 24 hours)  Producing Method (Flow, pump, gas	il and must be equal to or exceed top allow-	
V.	TEST DATA AND REQUEST FOIL WELL Date First New Oil Run To Tanks No Change Length of Test Actual Prog. During Test	CASING & TUBING SIZE  FOR ALLOWABLE (Test must be able for this a Date of Test  Tubing Pressure	after recovery of total volume of load of lepth or be for full 24 hours)  Producing Method (Flow, pump, gas)  Casing Pressure	il and must be equal to or exceed top allow- lift, etc.)  Choke Size	
V.	TEST DATA AND REQUEST FOIL WELL Date First New Oil Run To Tanks No Change Length of Test	CASING & TUBING SIZE  FOR ALLOWABLE (Test must be able for this a Date of Test  Tubing Pressure	after recovery of total volume of load of lepth or be for full 24 hours)  Producing Method (Flow, pump, gas)  Casing Pressure	il and must be equal to or exceed top allow- lift, etc.)  Choke Size	
V.	TEST DATA AND REQUEST FOIL WELL Date First New Oil Bun To Tanks No Change Length of Test Actual Proa. During Test  GAS WELL	CASING & TUBING SIZE  FOR ALLOWABLE (Test must be able for this a Date of Test  Tubing Pressure  Cti-Bois.	DEPTH SET  after recovery of total volume of load of lepth or be for full 24 hours.)  Producing Method (Flow, pump, gas)  Casing Pressure  Water-Bbls.	il and must be equal to or exceed top allow- lift, etc.)  Choke Size  Gas-MCF	

## 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.

Devre V. Rocks
(Signature)
District Prod & Drlg Supt.
(Title)

3-8-79 (Date)

4 and 0-110

VED

BY

SUPERVISOR DISTRICT I TITLE \_

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 conditions.

Separate Forms C-104 must be filed for each pool in mustifyly