

FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	1
	GAS	1
OPERATOR		1
PRORATION OFFICE		

AND  
THORIZATION TO TRANSPORT OIL AND NATURAL GAS

Effective 1-1-85

RECEIVED

AUG 14 1974

Operator Armer Oil Company	
Address 2110 Continental National Bank Building, Fort Worth, TX 76102	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name ARCO Federal	Well No. 4	Pool Name, including Formation Square Lake GBG-SA	Kind of Lease State, Federal or Fee Federal	Lease No. LC-02934
Location				
Unit Letter F	1980	Feet From The North	Line and 1980	Feet From The West
Line of Section 9	Township 17S	Range 30E	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"/> Navajo Crude Oil Purchasing Company	Address (Give address to which approved copy of this form is to be sent) P. O. Drawer 175, Artesia, New Mexico 88210					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Continental Oil Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 2197, Houston, Texas 77001					
If well produces oil or liquids, give location of tanks.	Unit H	Sec. 9	Twp. 17S	Rge. 30E	Is gas actually connected? Yes	When 7-21-74

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 X	Gas Well	New Well X	Workover	Deepen	Plug Back	Same Res'y.	Diff. Res'y.
Date Spudded 7-2-74	Date Compl. Ready to Prod. 7-18-74	Total Depth 3075' RKB	P.B.T.D. 3071' RKB					
Elevations (DF, RKB, RT, GR, etc.) 3693' GR 3703' RKB	Name of Producing Formation Grayburg - San Andres	Top Oil/Gas Pay 2656' RKB	Tubing Depth 3020' RKB					
Perforations 2656'-72' RKB (Metex); 2758'-67' RKB (Upper Premier); 2863'-78' RKB (Lower Premier); 2983'-96' RKB overall (Lovington).			Depth Casing Shoe 3075' RKB					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE 11"	CASING & TUBING SIZE 8-5/8" OD	DEPTH SET 495' RKB	SACKS CEMENT 100 sacks Class C					
7-7/8"	4-1/2" OD	3075' RKB	500 sacks Class H					
4"	2-3/8" OD	3020' RKB	None					

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 7-21-74	Date of Test 8-3-74	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hours	Tubing Pressure Pumping	Casing Pressure 20 psi	Choke Size None
Actual Prod. During Test 50 BF	Oil-Bbls. 50	Water-Bbls. 0	Gas-MCF 175 (Est)

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	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.

C. W. Stumbhoffer  
(Signature)

Agent

August 7, 1974

(Title)

(Date)

OIL CONSERVATION COMMISSION

AUG 14 1974

APPROVED

BY

OIL AND 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 allow able 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 multiple completed wells.