	HO. OF COPIES NO .ILIVES 15	1 _		1
	DISTRIBUTION	NEW MEXICO OIL	CONSERVATION CL (ISSION	Form C-104
	ANTA FE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-1 Effective 1-1-65
	ILE	-	AND	
	.s.g.s.	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS		
	TRANSPORTER OIL		RECEIVE	U
•	OPERATOR /	-	JAN 9 - 19/5	
I.	PRORATION OFFICE Operator		D. C. C.	
	Armer Oil Company			
	2110 Continental National Bank Bldg., Fort Worth, Texas 76102 Reason(s) for filing (Check proper box) Other (Please explain)			
	New Well	Change in Transporter of:		
	New Well Change in Transporter of: Oil X Dry Gas NRC effective 12/14/74.			
	Change in Ownership Casinghead Gas Condensate NRC effective 12/14/74.			
	If change of ownership give name and address of previous owner			
11.	DESCRIPTION OF WELL AND LEASE Lease Name Well No. Pool Name, Including Formation Kind of Lease Lease No.			
	Arco Federal	4 Square Lake	Grayburg-SA State, Fede	ral or Fee Federal LC-
	Location			029342(d)
	Unit Letter F ; 19	980 Feet From The North Lin	ne and 1980 Feet From	n The West
	Line of Section 9 Tot	wnship 17S Range	30E , NMPM,	Eddy County
III.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	18	
	Name of Authorized Transporter of Oil X or Condensate Address (Give address to which approved copy of this form is to be sent)			
	Navajo Refining Company - Pipeline Div. Box 159, Artesia, New Mexico 88210 Name of Authorized Transporter of Casinghead Gas X or Dry Gas Address (Give address to which approved copy of this form is to be sent)			
	Continental Oil Con	npany Unit Sec. Twp. Pige.	P. O. Box 2197, Ho	When
	If well produces oil or liquids, give location of tanks.	H 9 17S 30E	Yes	7/21/74
		th that from any other lease or pool,		.,, ==,
IV.	COMPLETION DATA		give comminging order number.	
	Designate Type of Completic	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v
			Total Double	P.B.T.D.
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	F.B.11.D.
	Elevations (DF, RKE, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
	Perforations			Depth Casing Shoe
	TUBING, CASING, AND CEMENTING RECORD			
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
			_	
v.	TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow able for this depth or be for full 24 hours)			
	Date First New Oil Fun 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	Oil-Bbls.	Water - Bbls.	Gas-MCF
	Actual Prod. During 1991			
	GAS WELL			
	Actual Prod. Test-NCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate
	Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (Shut-in)	Choke Size
W.	CERTIFICATE OF COMPLIANCE	DE .	OIL CONSERV	ATION COMMISSION
			JAN 1 0 1975	
	I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given		/// // ? ~	Gressett
	above is true and complete to the best of my knowledge and belief.		BY (K. C., September 1)	

Old Suly

(Signature)

Production Manager (Title)

January 6, 1975

(Date)

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 only Sections I. II. III., and VI for changes of owner, well name or number, or transporter, or other such change of condition.