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III.

NEW MEXICO OIL CONSERVATION COMMISS ON REQUEST FOR ALLOWABLE AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65

COMPRESSION OF FRENCH Company Condensate Company Condensate Company Condensate Company Condensate Company Condensate Condens	
OPERATOR / PRORATION OFFICE Operator ABGO: Atlantic Richfield Company Address Properties	7, 1977
Address Reason(s) for filing (Check proper box) New Well	7, 1977
Operator ARGON: Atlantic Richfield Company ARGON: Address	7, 1977
Address Reason(s) for filing (Check proper box) New Well X Change in Transporter of: Recompletion Oil Dry Gas allowable for the month of May Change in Ownership Casinghead Gas Condensate for completion of well. If change of ownership give name and address of previous owner DESCRIPTION OF WELL AND LEASE Lease Name Robinson Gas Com. Lease Name Robinson Gas Com. Unit Letter E : 1850 Feet From The North Line and 660 Feet From The West Line of Section 27 Township 178 Range 29E , NMPM, Eddy DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Cil Or Condensate Address to which approved copy of this form is Scurlock OilCompany 1216 Vaughan Bldg. Midland, Tex. 79	7, 1977
Reason(s) for filing (Check proper box) New Well	7, 1977
Reason(s) for filing (Chack proper box) New Well X Change in Transporter of: Recompletion Oil Dry Gas allowable for the month of May Change in Ownership give name and address of previous owner DESCRIPTION OF WELL AND LEASE Lease Name Robinson Gas Com. 1 Undesignated Grayburg Morrow State, Federal or Fee State Location Unit Letter E 1850 Feet From The North Line and 660 Feet From The West Line of Section 27 Township 17S Range 29E , NMPM, Eddy DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Cil Or Sondensate X Address (Give address to which approved copy of this form is Scurlock Oil Company 1216 Vaughan Bldg. Midland, Tex. 79	7, 1977
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DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Cil	County
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Name of Authorized Transporter of Cil or Condensate X Address (Give address to which approved copy of this form is 1216 Vaughan Bldg. Midland, Tex. 79	
Scurlock OilCompany 1216 Vaughan Bldg. Midland, Tex. 79	to be sent)
	702
Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is	to be sent)
None	
Unit Sec. Twp. Rge. Is gas actually connected? When	·
If well produces oil or liquids, and the liquids, and the location of tanks.	
If this production is commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA	
Oil Well Gas Well New Well Workover Deepen Plug Back Same R	es'v. Diff. Re
Designate Type of Completion - (X)	
Date Spudded Date Compl. Ready to Prod. Total Depth P.B.T.D.	
	 -
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Top Oil/Gas Pay Tubing Depth	
Perforations Depth Casing Shoe	
TUBING, CASING, AND CEMENTING RECORD	
CACKE CI	EMENT
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CO	
	
TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to o	r exceed top al
OII WELL	
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 Oil-Bbls. Water-Bbls. Gas-MCF	
GAS WELL	
GAS WELL Actual Prod. Test-MCF/D Length of Test Bbls. Condensate/MMCF Gravity of Condensate	it•
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(Date

Fill out only Sections I, II, III, and VI 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 multiply completed wells.