<u></u>	CISTRIBUTION /	NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE				Form C-104 Supersedes Old C-104 and C-1 Effective 1-1-65
-	U.S.G.S.	AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS				
	TRANSPORTER OIL / GAS 2					RECEIVED
t.	PRORATION OFFICE Coerdior ARCO Oil and Ga	s Company -		<u> </u>	•	MAR 14 1979
-	Division of Atlantic Richfield Company O.C.C. Address					
	P. O. Box 1710, Reason(s) for filing (Check proper box) New Well Recompletion			Other (Plea Change	se explain) in Operato ive: 4-1-7	
L	Change in Ownership f change of ownership give name	Casinghead Gas	Conden	s ate		
I. <u>I</u>	and address of previous owner	EASE				Kind of Lease
	Lease Name Empire Abo Unit Location		!	ne, Including Formation		State, Federal or Fee Federal
	,	Feet From The	Range Range	and <u>660</u>	Feet From T	Eddy County
	DESIGNATION OF TRANSPORT Name of Authorized Transporter of Oil			S	s to which approv	ed copy of this form is to be sent)
i	Amoco Pipeline Company Name of Authorized Transporter of Cas Amoco Production Compa Phillips Petroleum Com	inghead Gas 🕎 or	r Dry Gas	Ft. Worth, Te	xas 76102 to which approved, Levellan	ed copy of this form is to be sent) d, Texas 79336
	If well produces oil or liquids, give location of tanks.		Twp. Rge. 27	Is gas actually conne		
	f this production is commingled wit COMPLETION DATA	Oil Wel		give committing ord		Plug Back Same Resty, Diff. Rest
-	Designate Type of Completio	n - (X) Date Compl. Ready t	to Prod.	Total Depth	1.	P.B.T.D.
	No Change	Name of Producing F	Formation	Top Oil/Gas Pay	. :	Tubing Depth
1	Perforations Depth Casing Shoe					
	HOLE SIZE	TUBIN CASING & TU		DEPTH		SACKS CEMENT
	TEST DATA AND REQUEST FOOIL WELL Date First New Oil Run To Tanks	Date of Test		iter recovery of total ve pth or be for full 24 ho Producing Method (Fl	irs j	and must be equal to or exceed top allo
	No Change Length of Test	Tubing Pressure		Casing Pressure		Choke Size
	Actual Prod. During Test	Cil-Bbls.		Water - Bbis.		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 Casing Pressure Choke Size

APPROVED

L 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.

OIL CONSERVATION COMMISSION

APR 0 9 1979

- MILDIA, OFF

ВΥ SUPERVISOR, DISTRICT IL

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 condition.

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