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	DISTRIBUTION		•		
	SANTA FE		ONSERVATION COMMISSION	Form C-104	
	FILE	1	AND REAL	Supersodes Old C-104 and C-110 Effective 3-3-65	
	U.S.G.S.	AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL G	LSVED	
	LAND OFFICE	-			
	TRANSPORTER GAS		. APR - 2	1979	
	OPERATOR /	-		• •	
1.	PRORATION OFFICE		ARTESIA O	1	
	Operator ARCO Oil and Gas Company -				
	Division of Atlantic Richfield Company Address				
	P. O. Box 1710, Hobbs, New Mexico 88240				
	Reason(s) for filing (Check proper box)	Other (Please explain)		
	New Well	Change in Transporter of: Oil Dry Ga	Change in Operato		
	Recompletion Oil Dry Gas effective: 4-1-79 Change in Ownership Casinghead Gas Condensate				
1					
	If change of ownership give name and address of previous owner	•			
п.	DESCRIPTION OF WELL AND	LEASE		•	
	Lease Name		me, Including Formation	Kind of Lease	
	W. Red Lake Us	nit 13 Red	Lake Q.G.SA	State, Federal or Fee Federal	
Unit Letter A : 330 Feet From The North Line and 990 Feet From The East					
• ·			· · · · ·		
u.	Name of Authorized Transporter of Cil	TER OF OIL AND NATURAL GA	S Address (Give address to which approv	ed copy of this form is to be sent)	
	none	WIW			
	Name of Authorized Transporter of Cas	singhead Gas 📄 🛛 or Dry Gas 🗍	Address (Give address to which approv	ed copy of this farm is to be sent)	
	none	Unit Sec. Twp. P.ge.	Is gas actually connected? , Whe	B	
	If well produces oil or liquids, give location of tanks.		is gas actually connected?		
1	If this production is commingled with	th that from any other lease or pool,	give commingling order number:		
	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Besty Dill Besty	
	Designate Type of Completic			Plug Back Same Rosty. Dill. Hesty.	
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	No Change		·		
	Pool	Name of Producing Formation	Top O‼/Gas Pay	Tubing Depth	
	Perforations			Depth Casing Shoo	
	· · · · · · · · · · · · · · · · · · ·				
	HOLE SIZE		CEMENTING RECORD		
	HOLE SIZE	CASING & TUBING SIZE	DEPTHSET	SACKS CEMENT	
ļ			1	L	
	TEST DATA AND REQUEST FO	able for this de	per recovery of total volume of load oil t pth or be for full 24 hours)	and must be equal to or exceed top allow-	
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lif	i, eic.)	
	No Change	Tubing Pressure	Casing Pressure	Choke Size	
Ī	Actual Prod. During Test	Oil-Bbls.	Water-Bbls,	Gas-MCF	
Į		L	<u> </u>	1	
	GAS WELL				
ſ	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/I/MCF	Gravity of Condensate	
	Tester Marked Colors Lask as 1	Tubles Deer			
	Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size	
۲ م	CERTIFICATE OF COMPLIANCE		OIL CONSERVA	TION COMMISSION	
	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.		ADD 1 1 1070		
			APPROVED AFR 11	19/9 19	
			BY	pesser -	
			SUPERVISOR, DISTRICT, H		
	, · · · · · · · · · · · · · · · · · · ·		$\frac{1}{2} = \frac{1}{2} $		
	1 . Top H. K. an	l_n	If this is a request for allow	able for a newly dritted or deepened	
Bint rict Frod & Drig Supt. $3/27/73$					
-	The steel for a brig S	3/27/79	Here the explored the they go	at le fille font e amptitud i a <u>n est</u> de	