		·		
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	SANTA FE	I .	ONSERVATION COMMISSION	Form C-104
	FILE	. KEQUESI	FOR ALLOWABLE	Supersedes Old C-104 and C-11 Effective 1-1-65
	U.S.G.S.	1111001747101170 70	AND	
	LAND OFFICE	AUTHORIZATION TO TRA	NSPORT OIL HUENETURALS	ÊD
	Tou /	1		
	TRANSPORTER GAS	1	APD 0.40	30
	OPERATOR /	-	APR - 2 197	9
ŧ	PRORATION OFFICE	1	•	
	Operator ARCO Oil and G	as Company -	E. C. S.	
	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:	Change in Operato	or Name
	Recompletion	OII Dry Ga	effective: 4-1-79	·
	Change in Ownership	Casinghead Gas Conden	sate .	
	If change of ownership give name			
	and address of previous owner		·	
II.	DESCRIPTION OF WELL AND	LEASE		•
	Lease Name	Well No. Pool Nam	ne, Including Formation	Kind of Lease
	W. Red Lake lini	I 10 Red	Lake Q.G.SA	State, Federal or Fee Fee
	Location			
	Unit Letter J: 1650 Feet From The East Line and 2310 Feet From The South			
	Line of Section / , Tov	epnoR & & qidenv	27E , NMPM,	Eddy County
177	DECICALATION OF TRANSPORT	PED OF OIL AND NATURAL CA		
	Name of Authorized Transporter of Cil	TER OF OIL AND NATURAL GA [Y] or Condensate []	Address (Give address to which approve	ed copy of this form is to be sent!
		Maralo Relinine Co Peteline Division P.O. Box 175, Asteria, N. M. 88210		
	None of Authorized Transporter of Cas	singhead Gas X or Dry Gas	Address (Give address to which approv	ed copy of this form is to be sent)
	Philleto Peter leum	Company	Hoor Penbrook, Da	lessa, Texas 79762
	Manage and an Hearth	Unit See. Twp. Rge.	Is gas actually connected? When	
	give location of tanks.	1 B 17 1/85 127E	Yes!	unknown
	If this production is commingled wil	th that from any other lease or pool,	1	
	COMPLETION DATA			
•	Designate Type of Completic	Oli Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.
	Designate Type of Completion)	<u> </u>	! ! !
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
	No Change			
	Pool	Name of Producing Formation	Top Oll/Gas Pay	Tubing Depth
		<u> </u>		
	Perforations Depth Casing Shoo			Depth Casing Shoo
			CELEVELLO DECODO	
	1101 5 6175	T	CEMENTING RECORD	
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
**	TECT DATA AND REQUEST EA	OP ATTOWARD C.	b	
•	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 Run To Tanks	Date of Test	Producing Method (Flow, pump, gas life	;, etc.)
	No Change		·	
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size
	Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
	<u> </u>		<u> </u>	<u> </u>
		·		
	GAS WELL, Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Comply of Conde
	I THE THE PARTY AND THE PARTY			Gravity of Condensate
	Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size
	Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size

'I. 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.

(Signuture)

District Prod & Drlg Supt.

(Title)

OIL CONSERVATION COMMISSION

APR 1 1 1979 APPROVED

TITLE ___SUPERVISOR, DISTRICT II

This form is to be fired in compliance with AULE 1191.

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.