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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
110685 AND O.C.C.
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS
JUN 11 2 13 PM '69

Form
Supersedes Old C-104 and C-110
Effective 1-1-65
JUN 11 1969
O. C. C.
ARTESIA, N.M.

| | |
|--|--|
| Operator Atlantic Richfield Company ✓ | |
| Address P. O. Box 1978, Roswell, New Mexico 88201 | |
| Reason(s) for filing (Check proper box) | Other (Please explain) |
| New Well <input type="checkbox"/> | Change in Transporter of: Change from Continental Pipe Line Company |
| Recompletion <input type="checkbox"/> | Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/> to Navajo Refining Co - Pipeline Division |
| Change in Ownership <input type="checkbox"/> | Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> effective 5-28-69 |

If change of ownership give name and address of previous owner _____

| | | | | |
|---|----------------|--|--|-----------|
| Lease Name West Red Lake Unit | Well No. 11 | Pool Name, including Formation Red Lake Grayburg SA | Kind of Lease State, Federal or Fee | Lease No. |
| Location Unit Letter 0 ; 990 Feet From The South Line and 1890 Feet From The East Line of Section 7 Township 18S Range 27E, NMPM, Eddy County | | | | |

| | | | | | | |
|---|-----------|---|-------------|-------------|-----------------------------------|-----------------|
| Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Navajo Refining Co - Pipeline Division | | Address (Give address to which approved copy of this form is to be sent) P. O. Box 67, Artesia, New Mexico | | | | |
| Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum Company Pan American Petroleum Corp | | Address (Give address to which approved copy of this form is to be sent) Phillips Building, Odessa, Texas P. O. Box 68, Hobbs, New Mexico | | | | |
| If well produces oil or liquids, give location of tanks. | Unit B | Sec. 7 | Twp. 18S | Rge. 27E | Is gas actually connected? yes | When unknown |

If this production is commingled with that from any other lease or pool, give commingling order number: _____

| | | | | | | | | | |
|--------------------------------------|-----------------------------|-----------------|-----------|----------|-------------------|--------|-----------|-------------|--------------|
| Designate Type of Completion - (X) | | Oil Well | Gas Well | New Well | Workover | Deepen | Plug Back | Same Res'v. | Diff. Res'v. |
| 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 | | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | | DEPTH SET | | SACKS CEMENT | | | | |
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|---------------------------------|-----------------|-----------------|---|--|
| 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 | |

| | | | | |
|----------------------------------|---------------------------|---------------------------|-----------------------|-----------------------|
| Actual Prod. Test-MCF/D | | Length of Test | Bbls. Condensate/MMCF | Gravity of Condensate |
| Testing Method (pilot, back pr.) | Tubing Pressure (shut-in) | Casing Pressure (shut-in) | Choke Size | |

VI. 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.

A. D. Kloxin
(Signature)
District Production & Drilling Supt.
(Title)
June 9, 1969
(Date)

OIL CONSERVATION COMMISSION

APPROVED JUN 17 1969, 19
BY R. L. Harnett
OIL AND GAS INSPECTOR

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 only Sections I, II, III, and VI 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 completed wells.