

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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JUN 20 1985

O. C. D.  
ARTESIA, OFFICE

Form C-104  
Revised 10-01-78  
Format 06-01-83  
Page 1

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator Arch Petroleum Inc. ✓	
Address Suite II-A, 777 Taylor St., Fort Worth, Texas 76102	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input checked="" type="checkbox"/> Change in Ownership	Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate

If change of ownership give name and address of previous owner Sparkman Producing Company

II. DESCRIPTION OF WELL AND LEASE

Lease Name Welch Duke State	Well No. 1	Pool Name, including Formation Artesia-Queen GSA Field	Kind of Lease State, Federal or Fee State	Lease No. 647
Location Unit Letter <u>F</u> : <u>1320</u> Feet From The <u>West</u> Line and <u>2365</u> Feet From The <u>North</u> Line of Section <u>28</u> Township <u>18S</u> Range <u>28E</u> , NMPM, Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Navajo Refining Company	Address (Give address to which approved copy of this form is to be sent) North Freeman Avenue, Artesia, New Mexico 88210	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 28
	Twp. 18S	Rge. 28E
	Is gas actually connected? No	
	When Past ID-3 8-27-85 Chg Op	

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

*[Signature]*  
(Signature)

*[Signature]*  
(Title)

*[Signature]*  
(Date)

OIL CONSERVATION DIVISION

APPROVED AUG 19 1985, 19

BY ORIGINAL SIGNED  
BY LARRY BROOKS  
TITLE GEOLOGIST - NMOOD

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.