	DISTRIBUTION	NEW MEXICO OIL C	ONSERVATION COMMISSION	Form C-104
	SANTA FE /	· REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-11
	FILE / /	·	AND	Effective 1-1-65
	U.S.G.S.	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL G	ΔS
	LAND OFFICE		ino, on the property of	CEBEIVED -
	OPERATOR OIL GAS D			986 14 1 379
I.	PRORATION OFFICE			, , , , , , , , , , , , , , , , , , ,
	Operator ARCO Oil and Gas Company - Division of Atlantic Richfield Company			
	Address			
		, Hobbs, New Mexico 88240		
	Reason(s) for filing (Check proper box,		Other (Please explain)	
	New Well	Change in Transporter of:	Change in Operato	
	Recompletion	Oil Dry Gas	effective: $4-1-79$)
	Change in Ownership	Casinghead Gas Conden	sate 🔲	
	If change of ownership give name and address of previous owner		•	<u></u>
T.	DESCRIPTION OF WELL AND	LEASE		
	Lease Name Empire Abo Unit Z		ne, Including Formation re Abo	Kind of Lease State, Federal or Fee
	Location	. 1 /-		1/1/
	Unit Letter ; 19	80 Feet From The West Line	e and 660 Feet From T	he North
	Line of Section 6 , Tov	vnship 185 Range	28E , NMPM.	Eddy County
1.		TER OF OIL AND NATURAL GA	S	ed conv of this form is to be sent!
	Name of Authorized Transporter of Cil \(\sum \) or Condensate \(\sum \) Address (Give address to which approved copy of this form is to be sent) 2300 Continental National Bank Bldg.			
-	Amoco Pipeline Company Ft. Worth, Texas 76102 Name of Authorized Transporter of Casinghead Gas V or Dry Gas Address (Give address to which approved copy of this form is to be sent)			
Amoco Production Company Phillips Petroleum Company Address Othe Material Control of Dry Gas P.O. Drawer A, Levellan 4001 Penbrook, Odessa,		d, Texas 79336		
	If well produces oil or liquids,	Unit Sec. Twp. Ege.	Is gas actually connected? When	
	give location of tanks.	F 6 18 28	give commingling order number:	PP Unknown
	If this production is commingled with COMPLETION DATA	th that from any other lease or pool,	give commingling order number:	
• •		Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.
	Designate Type of Completic	on - (X)		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
	No Change			
	Pool .	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
	Perforations			Depth Casing Shoe
	Periorduons	•		
		TUBING, CASING, AND	CEMENTING RECORD	
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
	110400111			
		 		
		<u> </u>		
		OD ALLOWANTE C	(
٧.	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 allowable 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	t, etc.)
	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
TET	CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
i.	- Carrie Contract Con		APR 1 9 1979	
	I hereby certify that the rules and regulations of the Oil Conservation		APPROVED	
	Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		BY William	Jussell -
	—		SUPERVISOR DISTRICT II	
	Denze V. Rocks		This form is to be filed in compliance with RULE 1104.	
	(Signature)		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	
	District Prod & Drlg Supt.		tests taken on the well in accordance with RULE 111.	
			All sections of this form must be filled out completely for allow-	

79

(Date)

8

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.

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