	CISTRIBUTION 2 SANTA FE / FILE / V		ONSERVATION COMMISSION FOR ALLOWABLE AND	Form C-194 Supersedes Old C-104 and C-110 Effective 1-1-65	
	U.S.G.S. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS		\S		
	TRANSPORTER OIL / GAS 2 OPERATOR /			SCEIVED	
r.	PRORATION OFFICE			MAR 1 4 1979	
	Division of Atlantic Richfield Company				
ľ	Address			RTESIA, OFFICE	
ł	P. O. Box 1710, Reason(s) for filing (Check proper box)	Hobbs, New Mexico 88240) Other (Please explain)		
	New Well	Change in Transporter of:	Change in Operato	r Name	
	Recompletion	Oil Dry Ga Casinghead Gas Conden			
Ĺ				· · · · · · · · · · · · · · · · · · ·	
	f change of ownership give name and address of previous owner	•			
r. 1	DESCRIPTION OF WELL AND I	LEASE		•	
Ī	Lease Name	Well No. Pool Na	ne, Including Formation	Kind of Lease State, Federal or Fee	
	Empire Abo Unit K	AL Empi	re Abo	Chile, redend of the Male	
	Unit Letter K ; 207	5.2 Feet From The West Lin	e and <u>2248.16</u> Feet From Th	o South	
1 10- 20-				Eddy County	
Ł	Line of Section (D , 10w	nsnip / 0 G Range -	, Will M,		
	Amoco Pipeline Company		Actress (Give address to which approve 2300 Continental Nationa Ft. Worth. Texas 76102	i	
	Name of Authorized Transporter of Cas Amoco Production Compa Phillips Petroleum Com	inghead Gas 🝸 er Dry Gas 🗍 ny .	Address (Give address to which approve P.O. Drawer A, Levelland 4001 Penbrook, Odessa, T Is gas actually connected?	l, Texas 79336 Texas 79760	
	If well produces oil or liquids, give location of tanks.	F 6 18 28		MOXPP 9-3-60	
	If this production is commingled wit	h that from any other lease or pool,	give commingling order number:		
ξ. [COMPLETION DATA ·	Plug Back Same Res'v. Diii. Res'v.			
	Designate Type of Completio	i			
	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		l	Depth Casing Shc=	
			D CEMENTING RECORD	SACKS CEMENT	
	HOLE SIZE	CASING & TUBING SIZE	DEFTASEI		
]			
ا ۲۰	TEST DATA AND REQUEST FO	T 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			
i	OIL WELL Date First New Oil Run To Tanks	able for this de	pth or be for full 24 hours; Producing Method (Flow, pump, gas lift	, etc.)	
	No Change				
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
	Actual Prod. During Test	Oil-Bbis.	Water-Bbls.	Gas - MCF	
		· · · · · · · · · · · · · · · · · · ·	<u></u>	<u> </u>	
	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	
L CERTIFICATE OF COMPLIANCE			OIL CONSERVA	TION COMMISSION	
	I hereby certify that the rules and a	regulations of the Oil Conservation	APPROVED APR 1.9 1979 19		
	Commission have been complied v	with and that the information given best of my knowledge and belief.	BY_WQA	BY_ Wagresset	
	-		TITLE		
	11 1.1	`/	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 1:1.		
	Denne 1. R.a.				
	(Sign District Prod & Drlg S	ature)			
	(Ti	tle)	All sections of this form must be filled out completely for allow- able on new and recompleted wells.		
	3-7-79	u(e)	Fill out Sections 1, 11, 111, well name or number, or transport	and VI only for changes of owner, er, or other such change of condition.	
	70.			and the second	
