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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

RECEIVED
JAN 3 1969
O. C. C.
ARTESIA, OFFICE

Operator Atlantic Richfield Company	
Address P. O. Box 1978, Roswell, New Mexico 88201	
Reason(s) for filing (Check proper box)	
New Well <input type="checkbox"/>	Change in Transporter of: <input type="checkbox"/>
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain) To indicate Central Battery Location + show additional gas transporter	
If change of ownership give name and address of previous owner	

I. DESCRIPTION OF WELL AND LEASE				
Lease Name West Red Lake Unit	Well No. 15	Pool Name, including Formation Red Lake Grayburg SA	Kind of Lease State Federal xxx #14-08-0001-8970	Lease No. 0001-8970
Location Unit Letter H ; 2310 Feet From The North Line and 990 Feet From The East				
Line of Section 7 Township 18S Range 27E , NMPM, Eddy County				

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS	
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Continental Pipe Line Company	Address (Give address to which approved copy of this form is to be sent) N. Freeman Ave, 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 July 26, 1965

IV. COMPLETION DATA								
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		

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL		(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 lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL		Bbls. Condensate/MMCF		Gravity of Condensate	
Actual Prod. Test-MCF/D	Length of Test				
Testing Method (pitot, 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.	
<u>A. D. Kloxin</u> (Signature) District Production & Drilling Supt (Title) 1-2-69 (Date)	

OIL CONSERVATION COMMISSION	
APPROVED	JAN 6 1969
BY	W. A. Gressitt
TITLE OIL AND GAS INSPECTOR	
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.	