NO. OF COPIES REC	i 7			
DISTRIBUTI	1	Ĭ		
SANTA FE				
FILE				
U.S.G.S.				
LAND OFFICE				
IRANSPORTER	OIL			
TRANSFORTER	GAS			
OPERATOR				
PROBATION OF				

December 1, 1975

(Date)

NEW MEXICO OIL CONSERVATION COMMISSION

	SANTA FE			REQUEST FOR ALLOWABLE Supersedes Old C Effective 1-1-65												
	FILE U.S.G.S.		A1	AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS							Filec	tive .	1-1-65	•		
	LAND OFFICE	ANSPUR I	OIL AND	NATURAL	GAS				,							
	IRANSPORTER	OIL		RECEIVED												
		GAS) this teaf look if ♥ too flaff					
_	PRORATION OF	FICE								DE		A	197	ς		
I.	Operator	FICE	LL							DE	<u>. ن</u>	<u> </u>	137	<u> </u>		
	Atlantic Richfield Company										000					
	Address									ART	TESI	A, 0	FFIC	E		
	P. O. Box 17 Reason(s) for filing			xico	88240		1.	0.1 (01								
	New Well	(C.neck proper		nge (n Ti	ransporte	r of:		Other (Please								
	Recompletion	Ħ	011	igo III I		Dry G	as \square		in loca ive: ll		n of tank battery.					
	Change in Ownership	₽		inghead	Gas 🔽	Conde		FITECL		/01/75				•		
	***					· · · · · · · · · · · · · · · · · · ·	<u></u>		 		-					
	If change of owners and address of prev															
••	DESCRIPTION OF															
и.	DESCRIPTION O	F WELL A		No. Po	ool Name,	Including F	Tormation	•	Kind of Lea	se				Lease No.		
	Empire Abo	Unit "N"	7	F	mpire	Aho			State, Feder	ral or Fee	Fed		,	_		
ŀ	Location				p.r.c	1100		•		-	ren	era	1	NM025604		
	Unit Letter	G ;	2300 Fee	t From 7	The No:	rth Li	ne and 16	42	Feet From	The	Eas	t		·		
																
	Line of Section	9	Township	18S		Range	27E	, NMPM	i,	Eddy				County		
	DESCRIPTION O		00MDD 05	~** 4.			• ~									
ui.	Name of Authorized				ND NAI			ive address	to which appr	oved copy o	of this	form	is to	be sent)		
	Amoco Pipeli				_	_	1		'1 Bk. B		-	•		ŕ		
	Philipsopet	Foream C	Smiring bead G	as X	or Dry	Gas 🗀	Phi fis	ive addiess	to Which appr	ash copy	<u>. #0</u> 사람함	form	ris ta	797671		
	Amoco Produc								Andrews.			<i>- - - - - - - - - -</i>	125			
	If well produces oil	or liquids,	Unit	Sec.	Twp.	Rge.	Is gas actu	ally connect	ed? W	hen						
	give location of tank	cs.	<u> </u>	3	189	S 27E		Yes					05/2	29/68		
	If this production is	_	l with that fro	m any c	ther lea	se or pool,	give commi	ngling order	r number:							
IV.	COMPLETION D.	ATA		Oil	Well	Gas Well	New Well	Workover	Deepen	Plug Bo	ick	Same	Bes/	v. Diff. Res'v.		
	Designate Typ	pe of Compl	etion - (X)		i		1	1	1	1	1			1		
	Date Spudded		Date Con	npl. Rea	dy to Prod	d.	Total Dept	h		P.B.T.I	ɔ.			- 		
	Elevations (DF, RKE	B, RT, GR, etc	Name of	Producir	ng Format	ion	Top Oil/Go	as Pay		Tubing	Depth	1				
	B - 1 11				.	. ,	1	,		Depth C		. Cha.				
	Perforations									Depth	delife	Shoe	•			
		_		TUE	ING. CA	ASING. AN	D CEMENT	ING RECOR	!D							
	HOLE	HOLE SIZE CASING & TUBING SIZE						DEPTH SET				SACKS CEMENT				
					_											
							 									
							<u> </u>									
V.	TEST DATA ANI	D REQUEST	r for Alle	OWABL			ifter recovery epth or be for			land must i	be equ	ial to	or ex	ceed top allow		
	Date First New Oil I	Run To Tanks	Date of 7	rest-		7	<u> </u>	·	v, pump, gas	lift, etc.)						
	Length of Test		Tubing Pressure				Casing Pre	esure		Choke S	Choke Size					
	Actual Prod. During	Test	Oil - Bble	·			Water-Bbl	8 .	*	Gas - Ma	3F					
	GAS WELL						•									
	Actual Prod. Test-)	MCF/D	Length o	f Test			Bbls. Cond	lensate/MMC	F	Gravity	of Co	nden	sate			
	Testing Method (pitc	ot, back pr.)	Tubing P	ressure	(Shut-L	n)	Casing Pre	ssure (Shut	-in)	Choke S	Size					
													······································			
VI.	CERTIFICATE O	CERTIFICATE OF COMPLIANCE					OIL	CONSERV	ATION C	COM	MISS	SION				
						DEC 18 1975										
	I hereby certify the	hereby certify that the rules and regulations of the Oil Conservation ommission have been complied with and that the information given					APPRO	VED	1	0.			_ , ¹			
	above is true and	ommission have been complied with and that the information given ove is true and complete to the best of my knowledge and belief.					BY	W	$\mathcal{M}_{\mathcal{L}}$	greso	<u>eli</u>	<u> </u>				
								SUPERV	'ISOR, DIS	TRICT T	7					
		_					TITLE.									
	1 1	Dela holled							be filed in	-						
	- VI X.	(Signature)						is form mus	t be accomp	anied by a	a tabi	ulatio	on of	d or deepened the deviation		
		Acco	untant I				tests ta	ken on the	well in acc	ordance wi	ith A	ULE	111.			
			(Title)				All sections of this form must be filled out completely for allowable on new and recompleted wells.									

All sections of this form must be able 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.