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U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRODUCTION OFFICE		

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

NOV 19 1975

Operator Atlantic Richfield Company		O. C. C. ARTESIA, OFFICE
Address P. O. Box 1710, Hobbs, New Mexico 88240		
Reason(s) for filing (Check proper box)		Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of:	
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"/>

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name Empire Abo Unit "K"	Well No. 181	Pool Name, including Formation Empire Abo	Kind of Lease State, Federal or Fee Federal	Lease No. LC062412
Location Unit Letter K ; 1367 Feet From The South Line and 1440 Feet From The West Line of Section 1 Township 18S Range 27E, NMPM, Eddy County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Amoco Pipeline Company	2300 Continental Nat'l Bank Bldg, Ft Worth, Tx	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Amoco Production Company Phillips Petroleum Company	Box 367, Andrews, Texas 79714 Phillips Bldg, 4th & Washington, Odessa, Tx 79760	
If well produces oil or liquids, give location of tanks.	Unit F Sec. 1 Twp. 18S Rge. 27E	Is gas actually connected? Yes When 11/1/75

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

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded 9/17/75	Date Compl. Ready to Prod. 11-10-75		Total Depth 6203		P.B.T.D. 6200			
Elevations (DF, RKB, RT, GR, etc.) 3586.5' GR	Name of Producing Formation Abo		Top Oil/Gas Pay 6082'		Tubing Depth 6000'			
Perforations 6082-6110' 2 JSPE					Depth Casing Shoe 6203'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
11"	8-5/8" OD		1000'		450 SX			
7-7/8"	5 1/2" OD		6203'		1030 SX			
	2-3/8" OD		6000'					

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 10/30/75	Date of Test 11/10/75	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hrs	Tubing Pressure 80#	Casing Pressure Pkr	Choke Size 48/64"
Actual Prod. During Test 249 bbls	Oil-Bbls. 249 bbls	Water-Bbls. 0	Gas-MCF 159

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

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.

(Signature)
Accountant I
11/13/75
(Title)
(Date)

OIL CONSERVATION COMMISSION
NOV 26 1975
APPROVED
BY *W.A. Lussert*
SUPERVISOR, DISTRICT II
TITLE
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 deviated 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 oil well name or number, or transporter, or other such change of conditions.
Separate Forms C-104 must be filed for each pool in multiple completions.