		State of	New Mexico		Form C-104
	Energy, N	Minerals and N	latural Resources Department	" RECEINED	Revised 1-1-89 See Instructions C
P.O. Box 1980, Hobbs, NM 88240	OILC	CONSERV	ATION DIVISION	Į	at Bottom of Page
DISTRICT II P.O. Drzwer DD, Ariesia, NM 88210	Sa		Box 2088 Mexico 87504-2088	JAN 25 '90	
2 <u>15TRICT III</u> 1000 Rio Brazos Rd., Aztec, NM 87410					
• Operator		ANSPORT	IL AND NATURAL GAS	Well API No.	
ARCO OIL AND GAS COMP.	ANY 🖌			3001525612	
Vidress					
BOX 1710, HOBBS, NEW Reason(s) for Filing (Check proper box)	MEXICO 88240	J	Other (Please explain)	.)	
Vew Well		Transporter of:	Effective 2/		
Recompletion	Oil 🛛 🖾 Casinghead Gas 🗌	Dry Gas	J	,	
Thange in Operator]		
ad address of previous operator					
I. DESCRIPTION OF WELL		Pool Name, Incl	dia a Dourotion	Kind of Lesse FED	Lease No.
Lease Name WILMAR FEDERAL			RT BONE_SPRINGS	State, Federal or Fee	LC029389B
location					
Unit Letter	2130	Feet From The	SOUTH Line and 710	Feet From The	EASTLine
Section 4 Township	185	Range 31E	, NMPM,	EDDY	County
	*				
II. DESIGNATION OF TRAN Name of Authonized Transporter of Oil			URAL GAS Address (Give address to which	h approved arou of this for-	e is to he canel
PRIDE PIPELINE CO.	XX or Conder		BOX 2436, ABILENE		is to be serily
Same of Authorized Transporter of Casing	ghead Gas [X]	or Dry Gas] Address (Give address to which	h approved copy of this form	is to be sent)
CONOCO INC.		<u>In 1 n</u>	BOX 1959, MIDLAND		
f well produces oil or liquids, We boation of tanks.		Twp. R. 185 31	e. Is gas actually connected? E YES		
	from any other lease or	pool, give commi	egling order number:		
	·····				
V. COMPLETION DATA	Oil Well		New Well Workover	Deepen Plug Back Sa	me Res'v Diff Res'v
V. COMPLETION DATA Designate Type of Completion	Oil Well	Gas Well		Deepen Piug Back Sa 	me Res'v Diff Res'v
V. COMPLETION DATA Designate Type of Completion	- (X) Date Compl. Ready to	Cas Well	New Well Workover Total Depth	P.B.T.D.	me Res'v Diff Res'v
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V. COMPLETION DATA Designate Type of Completion Date Spaced	- (X) Date Compl. Ready to	Cas Well	New Well Workover Total Depth	P.B.T.D.	<u> </u>
V. COMPLETION DATA Designate Type of Completion Date Spaced	- (X) Dete Compl. Ready to Name of Producing Fo	Gas Well Pro d. ormation	New Well Workover Total Depth Top Oil/Gas Pay	P.B.T.D. Tubing Depth Depth Casing S	<u> </u>
V. COMPLETION DATA Designate Type of Completion Date Spaced	- (X) Dete Compl. Ready to Name of Producing Fo	Gas Well Cas Well Prod.	New Well Workover Total Depth	P.B.T.D. Tubing Depth Depth Casing S SA(Those CKS CEMENT
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Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.

2) All sections of this form must be filled out for allowable on new and recompleted wells.
3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
4) Separate Form C-104 must be filed for each pool in multiply completed wells.