

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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SANTA FE	
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U.S.D.A.	
LAND OFFICE	
TRANSPORTER	<input type="checkbox"/> OIL
	<input type="checkbox"/> GAS
OPERATOR	
PRODUCTION OFFICE	

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-78  
Formal 05-01-83  
Page 1

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JUL 07 1987

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS  
OIL CON. DIV.  
DIST. 3

I. Operator  
ARCO Oil & Gas Company, Division of Atlantic Richfield Company

Address  
1816 E. Hojave, Farmington, New Mexico 87401

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	
<input checked="" 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

Other (Please explain)

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Gardner	Well No. 28-1	Pool Name, including Formation Gavilan - Mancos	Kind of Lease State, Federal or Fee	Lease No. NM-04075
Location Unit Letter <u>N</u> : <u>990</u> Feet From The <u>South</u> Line and <u>1850</u> Feet From The <u>West</u> Line of Section <u>13</u> Township <u>25N</u> Range <u>3W</u> . NWPM, Rio Arriba County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Giant Refining Company	7227 No. 16th St., Phoenix, Arizona 85020
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Company	P. O. Box 990, Farmington, New Mexico 87401
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

Richard O. Raniel (Signature)  
Production Supervisor (Title)  
July 7, 1987 (Date)

CORRECTED COPY

OIL CONSERVATION DIVISION

JUL 29 1987

APPROVED Original Signed by CHARLES GHOLSON

BY

TITLE DEPUTY OIL & GAS INSPECTOR, DIST. #3

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.

#### IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well X	Gas Well	New Well	Workover	Deepen	Plug Back	Same Acc'y.	Diff. Acc'y. X
Date Spudded 10-9-86	Date Compl. Ready to Prod. (Recompletion) 6-12-87 <sup>10</sup>		Total Depth 8170		P.B.T.D. 8055 ~ Bridge plug				
Elevations (DF, RKB, RT, CR, etc.) 7237 RKB	Name of Producing Formation Gallup		Top Oil/Gas Pay 7030		Tubing Depth 6854				
Perforations Upper Gallup 7030'-7120'		Lower Gallup 7176'-7295'		Depth Casing Shoe					
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				

#### V. TEST DATA AND REQUEST FOR ALLOWABLE (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 6-3-87 6-13-87		Date of Test 6-15-87	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 Hours	Tubing Pressure 148 psi	Casing Pressure 578 psi	Choke Size -	
Actual Prod. During Test	Oil - Bbls. 98 95	Water - Bbls. 20 15	Gas - MCF 225 200	

#### GAS WELL

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

**CORRECTED COPY**