

|                  |     |  |
|------------------|-----|--|
| SANTAFE          |     |  |
| FILE             |     |  |
| U.S.G.S.         |     |  |
| LAND OFFICE      |     |  |
| TRANSPORTER      | OIL |  |
|                  | GAS |  |
| OPERATOR         |     |  |
| PRORATION 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

API # 30-045-24119

|  |   |
|--|---|
| Operator<br>ARCO Oil and Gas Company, Division of Atlantic Richfield Company |   |
| Address<br>P. O. Box 5540, Denver, Colorado 80217                            |   |
| 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

II. DESCRIPTION OF WELL AND LEASE

|  |                |  |  |                       |
|--|----------------|--|--|-----------------------|
| Lease Name<br>Schlosser WN Federal   | Well No.<br>8E | Pool Name, including Formation<br>Basin Dakota | Kind of Lease<br>State, Federal or Fee Federal | Lease No.<br>SF078673 |
| Location<br>Unit Letter F : 1660 Feet From The North Line and 1520 Feet From The West<br>Line of Section 27 Township 28N Range 11W , NMPM, San Juan County |                |  |  |                       |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

|  |  |            |             |             |                                  |                        |
|--|--|------------|-------------|-------------|----------------------------------|------------------------|
| Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/><br>Permian Corporation                    | Address (Give address to which approved copy of this form is to be sent)<br>P.O. Box 1720, Farmington, New Mexico 87401        |            |             |             |                                  |                        |
| Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/><br>Northwest Pipeline Corporation | Address (Give address to which approved copy of this form is to be sent)<br>3539 E. 30th, Box 90, Farmington, New Mexico 87401 |            |             |             |                                  |                        |
| If well produces oil or liquids,<br>give location of tanks.  | Unit<br>F  | Sec.<br>27 | Twp.<br>28N | Rge.<br>11W | Is gas actually connected?<br>NO | When<br>LINE CONNECTED |

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

IV. COMPLETION DATA

|   |                                       |                      |                          |                   |                            |           |             |              |
|---|---------------------------------------|----------------------|--------------------------|-------------------|----------------------------|-----------|-------------|--------------|
| Designate Type of Completion - (X)                              | Oil Well<br>X                         | Gas Well             | New Well<br>X            | Workover          | Deepen                     | Plug Back | Same Res'v. | Diff. Res'v. |
| Date Spudded<br>4-11-80   | Date Compl. Ready to Prod.<br>6-3-80  | Total Depth<br>6382' |                          | P.B.T.D.<br>6338' |                            |           |             |              |
| Elevations (DF, RKB, RT, GR, etc.)<br>5734'GL; 5744'DF; 5745'DF | Name of Producing Formation<br>Dakota |                      | Top Oil/Gas Pay<br>6193' |                   | Tubing Depth<br>6065'      |           |             |              |
| Perforations<br>Dakota 6279'-6317' & Graneros 6193'-6229'       |                                       |                      |                          |                   | Depth Casing Shoe<br>6381' |           |             |              |
| TUBING, CASING, AND CEMENTING RECORD                            |                                       |                      |                          |                   |                            |           |             |              |
| HOLE SIZE   | CASING & TUBING SIZE                  |                      | DEPTH SET                |                   | SACKS CEMENT               |           |             |              |
| 12-1/4"   | 8-5/8"                                |                      | 679'                     |                   | 500 sxs                    |           |             |              |
| 7-7/8"  | 4-1/2"                                |                      | 6381'                    |                   | 1410 sxs (2 stage)         |           |             |              |
|   | 2-3/8"                                |                      | 6065'                    |                   |                            |           |             |              |

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

|   |                                   |   |  |
|---|-----------------------------------|---|--|
| Actual Prod. Test-MCF/D<br>737                    | Length of Test<br>24 hrs          | Bbls. Condensate/MMCF<br>42.1 70% wtr & 30% oil | Gravity of Condensate<br>44.1° API @ 60° F |
| Testing Method (pitot, back pr.)<br>Back pressure | Tubing Pressure (Shut-in)<br>586# | Casing Pressure (Shut-in)<br>618#               | Choke Size<br>48/64"                       |

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.

K.L. Flinn  
Operations Information Assistant

June 9, 1980

OIL CONSERVATION COMMISSION

APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY Original Signed by FRANK T. CHAVEZ  
TITLE SUPERVISOR DISTRICT 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.