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i	SANTAIL				
!	FILE U.S.G.S.		1		
į					
,	LAND OFFICE		<u> </u>		
	TRANSPORTER	OIL			
		GAS	j	1	
i	OPERATOR		3		
ı.	PRORATION OFFICE		<u> </u>		

	LISTRICUTION SANTAFL FILE	REQUEST FOI A	DERVATION COMMISSION RIALLOWABLE ND	Form C-104 Supersedes Old C-104 and C Effective 1-1-C5					
1 1 1	U.S.G.S. LAND OFFICE TRANSPORTER GAS OPERATOR 3	AUTHORIZATION TO TRANS	PORT OIL AND NATURAL GA	5					
4 - 1	PRORATION OFFICE								
ļ L	ARCO Cil and Gas Compan	CO Oil and Gas Company, Division of Atlantic Richfield Company							
1960 Lincoln St. Suite 501, Denver, Colorado 80295									
	Reason's for filing (Check proper box) New Well Change in Transporter of: Assumed name for formerly								
	Recompletion Oil Dry Gos Atlantic Richfield Company.								
l	Change in Ownership								
	and address of previous owner								
II.	DESCRIPTION OF WELL AND LE Lease Name Horseshoe Gallup Unit	Well No. Pool Name, Including Form 232 Horseshoe Gallu	10 = 1	Lease:					
	Unit Letter F : 200	59 Feet From The North Line of	and 1710 Feet From Th	. West					
	Line of Section 4 Town	ship 3 <i>9</i> N Range	16W , NMPM, Sa	n Juan County					
ш.	DESIGNATION OF TRANSPORTI	ER OF OIL AND NATURAL GAS	(C) address to which approve	d copy of this form is to be senti					
Water Injection Well Water Section For Se									
	Name of Authorized Transporter of Castr	ignisud dus sir ziv, zivi		a copy of this form is to be semi					
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. P.ge.	lo gas actually connected? When						
If this production is commingled with that from any other lease or pool, give commingling order number:									
IV.	Designate Type of Completion	On wen	New Well Workover Deepen	Plug Back Same Besty, Diff, Besty.					
		Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
	Elevations (DF, REB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
	Perforations			Depth Casing Shoe					
		TUBING, CASING, AND		SACKS CEMENT					
	HOLE SIZE	CASING & TUBING SIZE	D#7TH SET						
		Tact must be of	ter recovery of soal volume of load oil o	and must be equal to or exceed top allow.					
1	. TEST DATA AND REQUEST FO	able for this de	pth or be for fully hours) Producing Method (Flow, pump, gas lif						
	Date First New Cil Run To Tanks		Casing Pressure	Choke Size					
	Length of Teet	Tubing Pressure	Water-Bbis.	Gae-MC ALLIVED					
	Actual Prod. During Test	Oil-Bbis.	WGIST - Date.	MAR 12 1979					
				OIL CON. COM.					
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Cendensat/MMCF	Gravity of Conden 1915T. 3					
	Teeting Method (pirot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (hut-in)	Choke Size					
,	I. CERTIFICATE OF COMPLIAN	CE	11	ATION COMMISSION					
		esculations of the Oil Conservation	APPROVED MAR 1 2 1979 . 19						
I hereby certify that the rules and regulations of the information given Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.			DEPUTY OIL & GAS INSPECTOR, DIST. #3						
	$\int \int \int \partial z$		TITLE						
	- M.H. C	20 pu	If this is a quest for allowable for a newly drilled or deepend well, this form let be accompanied by a tabulation of the deviet tests taken on to well in accordance with RULE 111. All section of this form must be filled out completely for slice able on new as recompleted wells. Fill out C. Sections I. II. III, and VI for changes of control well name or recompletely or other such change of control well name or recompletely and transporter, or other such change of control sections C-104 must be filed for each pool in multiple of controls.						
	(Sur	nature) //							
	(1	ille)							
	<u> </u>	vale)							