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Appropriate District Office
DISTRICT |
P.O. Box 1980, Hobbs, NM 88240

Energy, Minerals and Natural Resources Department

11

DISTRICT II P.O. Drawer DD, Astesia, NM 88210

OIL CONSERVATION DIVISION

P.O. Box 2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION

DISTRICT III
1000 Rio Brazos Rd., Aziec, NM 87410

Santa Fe, New Mexico 87504-2088

•		TO TRA	NSPOF	T OIL	AND NAT	TURAL GA					
Operator ARCO Oil and Gas Company							Well API No. 3004525254				
ARLU UTI and Gas (Company	·····					30	U43Z3Z34	<u> </u>		
1816 E. Mojave, Fa	armington	, New M	l exico	8740	01						
leason(s) for Filing (Check proper b	MORE)		_		Othe	Please capia	uir)				
New Well			Transporter	r of:	F. F. F +	ritua Aua		1000			
Recompletion	Oil Coainmhas		Dry Gas	. 🗒	ETTECT	ive Aug	ust 1,	1990			
Change in Operator Change of operator give same	Casingher	M GM	Condensat								
ad address of previous operator											
L DESCRIPTION OF WE	LL AND LE	ASE									
ease Name		Well No. Pool Name, Includin				ng Formation				Lease No.	
Maddox WN Federal	ı	4E Basin Da			ota		State	State Federal or Fee		NM0546	
Cocation		050		Ma	ما الحسن	950			Mant		
Unit LetterD	:	850	Feet From	The NO	rtn_time	850	Fe	et From The	West	Lin	
Section 24 Tox	washio	30N	Range	13	W . NA	APML	Sa	n Juan		County	
II. DESIGNATION OF T				NATU							
same of Authorized Transporter of	<u> </u>	or Conden	Serie .	X	1	address to wh				pt)	
Giant Refining Co						P.O.Box 256, Farmington, NM 87499 Address (Give address to which approved copy of this form is to be sent)					
Name of Authorized Transporter of G El Paso Natural G					P.O.Box 4990, Farming						
f well produces oil or liquids,	Unut				is gas actually			When?			
ve location of tanks.	D	24	30N	13W	Yes						
this production is commingled with		her lease or	pool, give o	commingi	····	er.					
V. COMPLETION DATA									,		
Designate Type of Comple	erion - OO	Oil Weil	Gau	Weil	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Resiv	
Designate Type of Comple		nol. Ready to	Prod		Total Depth		l	P.B.T.D.	L	_1	
ALC SPACES	Date Call	ipi. Ready w	71104		5-4-			F.B. 1.D.			
Sevations (DF, RKB, RT, GR, etc.)	Name of I	Producing Fo	ormation		Top Oil/Cas	-2ay		Tubing Dept	th .		
erforacions								Depth Casin	g Shoe		
			Q 1 0D 10		(T) (T) (T)	·C 05000					
UOLE SIZE					CEMENTI	NG RECUR DEPTH SET	<u>D</u>		SACKS CEM	ENT	
HOLE SIZE		ASING & TO	JOING SIZ	.E		DEFIN SE			SACKS CEM	L.11	
									·····		
			- M34								
. TEST DATA AND REQ	•										
	after recovery of t		of load oil	and must		exceed top allethod (Flow, pa			for full 24 hon	#\$.)	
Date First New Oil Run To Tank	Date of To	es			Linguistria wa	elbou (Flow, pi	erop, gas upt.	Controls			
meth of Test	Tubing Pr	residire.			Carly Pes		WE	Choke Size			
	, world				N.	n (y 123 -	. O				
Actual Prod. During Test	Oil - Bhis	L.			Water Bols	ALIC O. S.	1000	GA MCF			
						AUG O 6	1330				
GAS WELL					Ω	LCON	I. DIV				
Actual Prod. Test - MCF/D Length of Test					Bbis. Conden	"DIST.	· · · · · · · · · · · · · · · · · · ·	Gravity of	Condensate		
								- A			
esting Method puot, back pr.,	Tuoing ?	ud. sueser	(-· 1 1)		Casing Press	ure (Shut⊣n)		Choke Size			
					٦,						
VI. OPERATOR CERTI				Œ		DIL CON	ISFRV	'ATION	DIVISIO	NC	
I hereby certify that the rules and Division have been complied with	•				1		, UC; (V		J. 1.01		
is true and complete to the best of					D	Anne	Ali	GAT	1990		
					Date	Approve	N /HU	n n †			
Nita C	Quan	<i></i>				<i>'</i>	France) Th	olson		
Nita Cowan	Technic	al Acc	ta C=	100	By_						
Printed Name	1ecini10	ai Mil	Tatie	, ,,,,	Tala	DEPUTY	OIL & GA	s i ns pecti	DR, DIST. 🛊	#3	
8/3/90	(506)	325-7			Title						

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) 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.

Telephone No.

- 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 analtiply completed wells.