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Appropriate District Office
DISTRICT 1
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

DISTRICT II P.O. Drawer DiD, Astonia, NIM \$8210

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

OIL CONSERVATION DIVISION

DISTRICT III
1000 Rio Benzos Rd., Aziec, NM 87410 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

PERSON OF AND CAS COMPANY DIN OF ATLANTIC DISHETELD CO								Well API No.			
ARCO OIL AND GAS COMPANY, DIV. OF ATLANTIC RICHFIELD CO.								3004510327			
816 E. MOJAVE, FARMI	NGTON,	NEW ME	EXICO	87401	•						
son(s) for Filing (Check proper box)					Othe	t (Please expla	uin)				
www.			Transport								
completice.	Oil Cominghas		Dry Gas Condens		Effec	tive 10	0/01/90				
ings in Operator	Casinghe	IN CHES	Concess								
address of previous operator											
DESCRIPTION OF WELL	AND LE	ASE									
Name RSESHOE GALLUP UNIT Well No. Pool Name, Includia 154 HORSESH								Kind of Leans State, Federal or Fee 14-20-603-734			
			<u> </u>	10113231			3000,	reusa ur re	17 20 (
cation K	1980				DUTH	206			WEST		
Unit Letter	: Feet From The							et From TheLine			
Section 30 Townshi	ection 30 31N Range			, NMPM, SAN J			UAN County				
				_							
DESIGNATION OF TRAN				NATU				مناه م			
me of Authorized Transporter of Oil or Condensate					Address (Give address to which approved copy of this form is to be sent) P 0 B0X 4289, FARMINGTON, NM 87401						
ms of Authorized Transporter of Casinghead Gas					Address (Give address to which approved copy of this form is to be sent)						
vell produces oil or liquids,	Unit Sec.		Twp. Rge. 31N 16W		Is gas actually connected?		Whea	When ?			
location of tanks.	i ^K	32	31N	16W		NO				. <u>.</u>	
is production is commingled with that	from any of	her lease or	pool, give	e comming!	ing order muni	er:					
COMPLETION DATA		Oil Wei	1 6	ias Well	New Well	Workover	D	Dhu Bash	Same Res'v	Diff Res'v	
Designate Type of Completion	- (X)	I OII MEI		ME WELL	i isem mett	WOLKOVEI	Decpes	I Link Deer		pili kest	
e Spudded	Date Com	pi. Ready i	o Prod.		Total Depth		1 .,	P.B.T.D.	 -		
<u>'</u> .											
vations (DF, RKB, RT, GR, etc.)	Name of Producing Formation				Top Oil/Gas Pay			Tubing Depth			
orations					L			Depth Casi	ng Shoe		
								•	•		
		TUBING	, CASIN	NG AND	CEMENTI	NG RECOR	D.				
HOLE SIZE	CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT			
	+							-			
					ļ						
	 							 			
TEST DATA AND REQUE	ST FOR	ALLOW	ABLE		1			. 6			
L WELL (Test must be after	recovery of t	total volume	of load o	il and must				-	for full 24 hou	F3.)	
te First New Oil Run To Tank	Date of T	est			Producists M	THE POPULATION IN	grafi gairtigh.				
ngth of Test	Tubing Pr				Casing Page	- 0	c 1990	Choice Size			
igui or rea	i moing ri	CSSUIC				SEP 2	, 6 1500	1 1 20			
tual Prod. During Test	Oil - Bhis	l.			Water - Bbis	mil (*)	JN. D	HOL MCF	_		
		<u>.</u>				00	157.3	·			
AS WELL						· ·	• • • • •				
tual Prod. Test - MCF/D	Length of	Test			Bbis. Conde	me/MMCF	,	Gravity of	Condensate		
	Tobing Processes (Classics)				Carine Press	(Chara :)		Out S		· · · · · · · · · · · · · · · · · · ·	
ting Method (pitet, back pr.)	Tubing Pressure (Shut-in)					(-		
	<u> </u>		TW 7 4 2 1	Marks	_		_	<u></u>	San Carrie		
L OPERATOR CERTIFIC	AIEU	r COM		ILE		OIL COI	NSERV	ATION	DIVISK	MC	
t covery was we need all regulations of the UE Communities Division have been compiled with and that the information gives above						ウェール。A A A A A A A A A A A A A A A A A A A					
is two and exception to the lock of my		and belief.			Date	Approvi		SEP 27	1990	e to the second	
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Lare Con	ysin.		 		By_		3	4) E	Year /		
DAVE CORZINE		PROD.		RVISOR			SUPER	RVISOP (a District	# C	
Printed Name		/ EOE \	Title	7507	Title	·			JIO I MICI	F J	
SEPTEMBER 24, 1990 Date) 325- dephone N								
		.6			13						

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.
- 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.