

Submit to: Appropriate District Office  
DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

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

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

State of New Mexico  
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION  
P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

Form C-104  
Revised 1-1-89  
See Instructions  
at Bottom of Page

*Well  
Filer*

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

Operator VASTAR RESOURCES, INC. <i>36619</i>	Well API No. 30-045-27801
Address 1816 E. MOJAVE, FARMINGTON, NEW MEXICO 87401	
Reason(s) for Filing (Check proper box) New Well <input type="checkbox"/> Change in Transporter of: Recompletion <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Change in Operator <input checked="" type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> Effective date <u>03/01/94</u>	
If change of operator give name and address of previous operator ARCO Oil and Gas Company, 1816 E. Mojave, Farmington, NM 87401	

II. DESCRIPTION OF WELL AND LEASE

Lease Name ATLANTIC FRUITLAND 24 COM <i>14129</i>	Well No. 2	Pool Name, including Formation BASIN FRUITLAND COAL <i>71629</i>	Kind of Lease State, Federal or <u>Fee</u>	COM Lease No. NMNM 86300
Location Unit Letter <u>L</u> : <u>1750</u> Feet From The <u>South</u> Line and <u>790</u> Feet From The <u>West</u> Line Section <u>24</u> Township <u>31N</u> Range <u>10W</u> , <u>NMPM</u> , San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Shut In. Waiting on Pipeline. <i>486730</i>	
If well produces oil or liquids, give location of tanks.	

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/>	Mug Back <input type="checkbox"/> Same Res'v <input type="checkbox"/> Diff Res'v <input type="checkbox"/>
Date Spudded	Date Compl. Ready to Prod.	P.B.T.D.
Elevations (DF, RKB, RI, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay
Perforations		Tubing Depth
		Depth Casing Shoe

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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 for full 24 hours)			
Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	<b>RECEIVED</b> FEB 17 1994 OIL CON. DIV DIST. 3
Length of Test	Tubing Pressure	Casing Pressure	
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	

GAS WELL			
Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR 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 above is true and complete to the best of my knowledge and belief.

*R.D. Johnston*  
Signature  
R. D. Johnston Operations Superintendent  
Printed Name  
02/16/94 Date  
505-599-4325 Telephone No.

OIL CONSERVATION DIVISION

Date Approved FEB 17 1994  
By *[Signature]*  
Title SUPERVISOR DISTRICT #8

INSTRUCTIONS: This form is to be filed in compliance with Rule 1101

- 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 IV for changes of operator, well name or number.