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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

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AUG 25 1975

**I. Operator**  
Atlantic Richfield Company O. C. C.  
ARTEBIA, OFFICE  
Address  
P. O. Box 1710, Hobbs, New Mexico 88240  
Reason(s) for filing (Check proper box) Other (Please explain)  
New Well  Change in Transporter of:  
Recompletion  Oil  Dry Gas   
Change in Ownership  Casinghead Gas  Condensate

If change of ownership give name and address of previous owner \_\_\_\_\_

**II. DESCRIPTION OF WELL AND LEASE**

|                     |          |                                |                             |                     |
|---------------------|----------|--------------------------------|-----------------------------|---------------------|
| Lease Name          | Well No. | Pool Name, including Formation | Kind of Lease               | Lease No.           |
| Empire Abo Unit "E" | 381      | Empire Abo                     | State, Federal or Fee State | 647                 |
| Location            |          |                                |                             |                     |
| Unit Letter         | C        | ; 2475 Feet From The West      | Line and 1155               | Feet From The North |
| Line of Section     | 35       | Township 17S                   | Range 28E                   | , NMPM, Eddy 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"/>         | Address (Give address to which approved copy of this form is to be sent)             |
| Amoco Pipeline Company   | 2300 Continental Nat'l Bk Bldg. Ft. Worth, TX 76102                                  |
| Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent)             |
| Amoco Production Company<br>Phillips Petroleum Company   | P. O. Box 367, Andrews, TX 79714<br>Phillips Bldg. 4th & Washington-Odessa, TX 79760 |
| If well produces oil or liquids, give location of tanks.   | Unit Sec. Twp. Rge. Is gas actually connected? When                                  |
| P 26 17S 28E   | Yes 8-9-75   |

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 <input checked="" type="checkbox"/> | Gas Well        | New Well <input checked="" type="checkbox"/> | Workover | Deepen | Plug Back | Same Res'v. | Diff. Res'v. |
| Date Spudded  | Date Compl. Ready to Prod.                   | Total Depth     | P.B.T.D.                                     |          |        |           |             |              |
| 7-7-75  | 8-8-75                                       | 6385'           | 6339'  |          |        |           |             |              |
| Elevations (DF, RKB, RT, GR, etc.)  | Name of Producing Formation                  | Top Oil/Gas Pay | Tubing Depth                                 |          |        |           |             |              |
| 3683.8' GR  | Abo 6239.5'                                  | 6236.5'         | 6135'  |          |        |           |             |              |
| Perforations  | Depth Casing Shoe                            |                 |  |          |        |           |             |              |
| 6250, 6251, 6252, 6253, 6254, 6255, 6256, 6257, 6258, 6259, 6260, 6261, 6262, 6263, 6264' | 6385'  |                 |  |          |        |           |             |              |
| TUBING, CASING, AND CEMENTING RECORD  |  |                 |  |          |        |           |             |              |
| HOLE SIZE   | CASING & TUBING SIZE                         | DEPTH SET       | SACKS CEMENT                                 |          |        |           |             |              |
| 11"   | 8-5/8" OD                                    | 1000'           | 515 sx                                       |          |        |           |             |              |
| 7-7/8"  | 5-1/2" OD                                    | 6385'           | 1400 sx                                      |          |        |           |             |              |
|   | 2-3/8" OD                                    | 6135'           |  |          |        |           |             |              |

**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.) |            |
| 8-9-75                          | 8-11-75         | Flowing                                       |            |
| Length of Test                  | Tubing Pressure | Casing Pressure                               | Choke Size |
| 21 hrs                          | 185#            | Pkr   | 48/64"     |
| Actual Prod. During Test        | Oil-Bbls.       | Water-Bbls.                                   | Gas-MCF    |
| 712 bbls                        | 712             | 0   | 414        |

**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. 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.

A. L. Shackelford  
(Signature)  
Accountant I  
(Title)  
8-14-75  
(Date)

OIL CONSERVATION COMMISSION  
APPROVED AUG 26 1975, 19  
BY W. A. Gressett  
TITLE SUPERVISOR, DISTRICT II

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 conditions.  
Separate Forms C-104 must be filed for each pool in multiple completed wells.