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CISTRIBUTION SANTA FE /		FOR ALLOWABLE	Form C-104 Supersedes Old C-104 and C-11 Effective 1-1-65
U.S.G.S.	AUTHORIZATION TO TRA	AND ANSPORT OIL AND NATURAL (SAS
LAND OFFICE			RECEIVED
GAS 2 OPERATOR / PRORATION OFFICE			MAR 1 4 1979
Operator ARCO 011 and (• •		O. C. C.
Address	tlantic Richfield Company		ARTESIA, OFFICE
P. O. Box 1710 Reason(s) for filing (Check proper bo	0, Hobbs, New Mexico 8824	0 Other (Please cxplain)	
New Well	Change in Transporter of:	Change in Operat	or Name
Recompletion Change in Ownership	Oil Dry Ga Casinghead Gas Conder	effective: 4-1-7	
If change of ownership give name			
and address of previous owner	<u></u>		<u> </u>
DESCRIPTION OF WELL AND		me, Including Formation	Kind of Lease
Empire Abo Unit	372 Empi	re Abo	State, Federal or Fee
Unit Lotter E : 24	190 Foot From The North Lin	e and _//00 Feet From "	The West
Line of Section 3.5	ownship 17_S Range	28E, NMPM.	Eddy County
Amoco Pipeline Compar	•	Access Give address to which appro 2300 Continental Nation Ft. Worth, Texas 76102	
Name of Authorized Transporter of C Amoco Production Comp	usinghead Gas 🕎 or Dry Gas 🗍	Address (Give address to which appro P.O. Drawer A. Levellar	ved copy of this form is to be sent; nd. Texas 79336
Phillips Petroleum Co	Unit Sec. Twp. Rgs.	4001 Penbrook, Odessa, Is gas actually connected? , Wh	Texas 79760
give location of tanks.	P 26 17 28	yes	8-22-77
If this production is commingled w COMPLETION DATA ·	ith that from any other lease or pool,	sive comforingling order numbers	¹ Plug Back ¹ Same Res'v. ¹ Diff. Res'v.
Designate Type of Complet	ion – (X)		Piug Buck - Sume Res-V. Din. Res-V
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
No Change Fool	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Perforations		1	Depth Casing Shoe
	TUBING CASING AND	CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
			·
LEST DATA AND REQUEST I	FOR ALLOWABLE (Test must be a	free recovery of total volume of load ail	and must be equal to or exceed top allow
OIL WELL Date First New Oil Run To Tanks		pth or be for full 24 hours)	·
No Change		Producing Method (Flow, pump, gas li	<i>]i, «ic.)</i>
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oll-Bbls.	Water - Bbls.	Gas-MCF
F	· · · · · · · · · · · · · · · · · · ·		
GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Chake Size
CERTIFICATE OF COMPLIAN			ATION COMMISSION
		•	1070
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given		APPROVED APR 17	
above is true and complete to th	he best of my knowledge and belief.	BY_ Waynessett	
		TITLE SUPERVISOR, DIS	TRICT II
Denze 1. Kuchs (Signature)		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	
3879	***/	sble on new and recompleted wells. Fill out Sections E. II. III, and VI only for changes of owner,	
(1	Date)	well name or number, or granspor	ter, or other such change of condition.

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