

## OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

RECEIVED

JUN 24 1983

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GASO. C. D.  
ARTESIA, OFFICE1. Operator  
Phillips Oil Company

Address

P. O. Box 128, Loco Hills, New Mexico 88255

Reason(s) for filing (Check proper box)

New Well ☐Recompletion ☐Change in Ownership ☒

Change in Transporter of:

Oil ☐Casinghead Gas ☐Dry Gas ☐Condensate ☐

Other (Please explain)

Change in Lease Name

Arco

If change of ownership give name and address of previous owner: General American Oil Co. of Texas, P. O. Box 128, Loco Hills, NM 88255

## 2. DESCRIPTION OF WELL AND LEASE

Lease Name	Arco Fed	Well No.	1	Pool Name, Including Formation	Grayburg-Jackson-SR-G-SH	Kind of Lease	State, Federal or Fee Federal	Lease No.	074936
Location	K	1980	Feet From The	South	Line and	1980	Feet From The	West	
Unit Letter	K								
Line of Section	17	Township	17-S	Range	30-E	NMPM,	Eddy	County	

## 3. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Navajo Refining Company — Pipeline Division	Address (Give address to which approved copy of this form is to be sent)	P.O. Box 159 Artesia, New Mexico 88210				
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Continental Oil Company	Address (Give address to which approved copy of this form is to be sent)	Houston, Texas Box 2197 77031				
If well produces oil or liquids, give location of tanks.	Unit K	Sec. 17	Twp. 17S	Rge. 30E	Is gas actually connected? When	Yes	7-1-72

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

## 4. COMPLETION DATA

Designate Type of Completion — (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Some Res'v.	Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
Perforations			Depth Casing Shoe					

## TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

## 5. 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.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

## 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

## 6. 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.

Randell N. Hawkins  
Randell N. Hawkins (Signature)  
Field Superintendent

(Title)

April 11, 1983  
(Date)

## OIL CONSERVATION DIVISION

APPROVED JUN 28 1983

Original Signed By  
BY Leslie A. Clements  
Supervisor District II

TITLE

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 condition. Separate Form C-104 must be filed for each pool in multiple.