| | HO. OF COPIES RECEIVED | 51 | | |
|-----|---|--|---------------------------------------|--|
| | DISTRIBUTION | | | |
| • | SANTA FE / | | CONSERVATION COMMISSION FOR ALLOWABLE | Form C-104 |
| | FILE | . REQUEST | AND | Supersedes Old C-101 and C-11 Elfoctive 1-1-65 |
| | U.S.G.S. | AUTHORIZATION TO TR | ANSPORT OIL AND NATURAL | |
| | LAND OFFICE | | AND ON TOTE AND NATURALLY | CASCEIVED |
| | TRANSPORTER OIL / GAS / | | • | APR - 2 1979 |
| | OPERATOR / | | | AIN - 2 13/3 |
| | PROPATION OFFICE | - | • | |
| 1. | Operator ARCO 011 and 0 | Sas Company - | | G.C.C. |
| | | tlantic Richfield Company | <i>5</i> | The state of the s |
| | Address | | | |
| | P. O. Box 1710, Hobbs, New Mexico 88240 | | | |
| | Reason(s) for filing (Check proper bo | ×) | Other (Please explain) | |
| | New Well | Change in Transporter of: | Change in Opera | |
| | Recompletion Change in Ownership | Oil Dry G | ELIECTIVE: 4-1- | 79 |
| | Change in Consersing | Casinghead Gas Conde | ensate | |
| | If change of ownership give name, and address of previous owner. | | | |
| 11. | DESCRIPTION OF WELL AND | TEACE | • | |
| - | Lease Name | | ame, Including Formation | Kind of Lease |
| | W. Red Lake lin | I 3 Red | Lake Q.G.SA | State, Federal or Fee |
| | Location | | 72002 9 2 311 | tee |
| | Unit Letter C ; 6 | 60 Feet From The North LI | ne and <u>1980</u> Feet From | The West |
| | | | | |
| | Line of Section / , To | waship /8 S Range | 27E . NMPM, E | ddy County |
| m. | DESIGNATION OF TRANSPOR | TER OF OIL AND NATURAL G | 45 | 0 |
| | Name of Authorized Transporter of Ci | or Condensate | Address (Give address to which appro | wed copy of this form is to be sent) |
| | Rayalo Relinine Co | Celeline Division | P.O. Box 175, Peter. | a, N.M. 88210 |
| | Name of Authorized Transporter of Co | isinghéad Gas 🔲 or Dry Gas 🗍 | Address (Give address to which appro | wed copy of this form is to be sent) |
| | theles letisleum | Company | Hoor Penbrook 00 | desto, Texas 79762 |
| | If well produces oil or liquids, give location of tanks. | Unit See. Twp. Pige. | Is gas actually connected? Wh | en |
| | | | yes! | 9-29-60 |
| | COMPLETION DATA | ith that from any other lease or pool, | give commingling order number: | |
| | Designate Type of Completi | Oil Well Gas Well | New Well Workover Deepen | Plug Back Same Res'v. Diff. Hes'v. |
| | | iiii | | |
| | Date Spudded | Date Compl. Ready to Prod. | Total Depth | P.B.T.D. |
| i | No Change | | | |
| | P601 | Name of Producing Formation | Top O!!/Gas Pay | Tubing Depth |
| | Perforations | | | Depth Casing Shoe |
| | | | | Depth Custing Snoo |
| | | TUBING, CASING, AN | D CEMENTING RECORD | |
| | HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT |
| | | | | · |
| | · | | | |
| | | | | |
| ١ | | | | |
| ν. | TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable.) OIL WELL | | | |
| İ | Date First New Oil Run To Tanks | Date of Test | Producing Method (Flow, pump, gas li | ft, etc.) |
| | No Change | | | • |
| | Length of Test | Tubing Pressure | Casing Pressure | Choke Size |
| | | | | |
| | Actual Prod. During Test | Oil-Bbis. | Water - Bbls. | Gas-MCF |
| Į | | <u> </u> | 1 | |
| | GAS WELL | · | | |
| ſ | Actual Prod. Test-MCF/D | Length of Test | Bbis. Condensate/MMCF | Gravity of Condensate |
| - 1 | | | | James Grand Control of |
| ı | Testing Method (pitot, back pr.) | Tubing Pressure | Casing Pressure | Choke Size |
| | | | | 1 |
| 'n. | CERTIFICATE OF COMPLIAN | CE | OIL CONSERVA | TION COMMISSION |
| | | | APR 1 1979 | |
| 1 | I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given | | APPROVED APPROVED | , 19 |
| | Commission have been complied t | vith and that the information given best of my knowledge and belief. | : /// / | 1 and inter- |

Prod & Drlg Supt.

(Title)

3/27/79

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.

Wid. form is to be filled in compilance with RULE 1154.

TITLE SUPERVISOR, DISTRICT IL