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	DISTRIBUTION SANTA FE				
ļ	FILE			-	
	U.S.G.S.				
ĺ	LAND OFFICE				
	TRANSPORTER	OIL			
		GAS			
	OPERATOR				
	PRORATION OFFICE				
	Operator ARCO	Oil a	nd	Gas	
	Divis	sion o	of A	tla	
ĺ	Address				
	P. O.	Box	171	.0,	
	Reason(s) for filing (Check proper box				
	New Well				
	Recompletion				
3		i 1			

	SANTA FE FILE U.S.G.S.	. REQUEST	FOR ALLOWABLE AND	Form C-104 Supersedes Old C-104 and C-11 Effective 1-1-65			
	IRANSPORTER OIL GAS	AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL	GAS			
	OPERATOR PRORATION OFFICE						
1.	Operator ARCO Oil and Gas Company - Division of Atlantic Richfield Company						
	Address P. O. Box 1710, Hobbs, New Mexico 88240						
	Reason(s) for filing (Check proper box) Other (Please explain)						
	New Well Recompletion Change in Ownership	Change in Transporter of: Oil Dry Go Casinghead Gas Conde	effective: 4-1	Change in Operator Name effective: 4-1-79			
	If change of ownership give name and address of previous owner						
II.	DESCRIPTION OF WELL AND LEASE						
	Lease Name Location Location Location	-1 2 22	ing "M" San andres	Kind of Lease State, Federal or Fee			
	Unit Letter ; 19	00 Feet From The South Lir	ne and <u>800</u> Feet From	The West			
	Line of Section 20 , To	wnship 95 Range	33E , NMPM,	Lea County			
III.	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA					
	Name of Authorized Transporter of Oi	or Condensate	Bod 900, Dallas	Teslas 75221			
	Name of Authorized Transporter of Ca		Address (Give address to which appro	bued copy of this form is to be sent)			
	Cities Sarvece	Unit Sec. Twp. Rge.	Is gas actually connected?	Okla. 74/02			
	If well produces oil or liquids, give location of tanks.	N 20 9 33	Yes	10-5-77			
	If this production is commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA Oil Well Gas Well New Well Workover Deepen Plug Back Same Restv. Diff. Restv.						
	Designate Type of Completi		· · · ·	1			
	No Change	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.			
	Pool	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth			
	Perforations _ Depth Casing Shoe						
			D CEMENTING RECORD				
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			
v.	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 for this depth or be for full 24 hours)						
	Date First New Oil Run To Tanks No Change	Date of Test	Producing Method (Flow, pump, gas l	ift, etc.)			
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size			
	Actual Prod. During Test	Oil-Bbis.	Water-Bbls.	Gas - MCF			
	GAS WELL						
	Actual Prod. Test-MCF/D	Length of Test	Bb!s. Condensate/MMCF	Gravity of Condensate			
	Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size			
VI.	CERTIFICATE OF COMPLIAN	CE	OIL CONSERVA	ATION COMMISSION			
	V barretin areas of the after and a		APPROVED APRIC	19			
	Commission have been monthled t	regulations of the Oil Conservation of the and that the information given best of my knowledge and belief.	BY Serry	Tertim			
	The state of the s		STIPERVICOU				
	21 079 X	Dany	TITLE BOILTY IN	compliance with THE COA			
	Deine 1. K	ales III	If this is a request for allo	compliance with RULE 1104. wable for a newly drilled or deepened			
	District Prod & Bris	Airo) ,	well, this form must be accompated tests taken on the well in acco	anied by a tabulation of the deviation rdance with RULE 111.			

 $\,$ All sections of this form must be filled out completely for allowable on new and recompleted wells. Fill out Sections I, II, III, and VI only for changes of owner, well name or number, or transporter, or other such change of condition.

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

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MAR 1 4 1979
OIL CONSERVATION COMM.