

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

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

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

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE
Lease Name
State "T"
Well No. 7
Pool Name, Including Formation
Denton Devonian
Kind of Lease
State, Federal or Fee State
Lease No.
B-9774
Location
Unit Letter N
990 Feet From The South Line and 2310 Feet From The West
Line of Section 2
Township 15S
Range 37E
NMPM, Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil ☒ or Condensate ☐
Shell Pipeline Corporation
Address (Give address to which approved copy of this form is to be sent)
Box 1008, Hobbs, New Mexico
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐
Tipperary Oil & Gas Corporation
Address (Give address to which approved copy of this form is to be sent)
500 W. Illinois, Midland, Texas
If well produces oil or liquids, give location of tanks.
Unit M
Sec. 2
Twp. 15S
Rge. 37E
Is gas actually connected? Yes
When 8/18/74

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 ☒ Gas Well ☐ New Well ☐ Workover ☐ Deepen ☒ Plug Back ☐ Same Res'v. ☐ Diff. Res'v. ☒
Date Spudded 6/13/74
Date Compl. Ready to Prod. 11/12/74
Total Depth 12,420'
P.B.T.D. 12,376'
Elevations (DF, RKB, RT, GR, etc.) 3798.65' GR
Name of Producing Formation Devonian
Top Oil/Gas Pay 12,216'
Tubing Depth 8894'
Perforations 12333, 39, 45, 51, 57 & 12366'
Depth Casing Shoe 9232'
12216, 22, 31, 41, 58, 62, 69 & 12275'
TUBING, CASING, AND CEMENTING RECORD
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT
17-1/4" 9-5/8" OD 2110.05' 1300
8-3/4" 7" OD 9232' 600
6-1/8" 4-1/2" OD liner 12418' 375
2-7/8" OD 11772'

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)

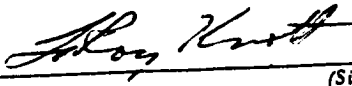
Date First New Oil Run To Tanks 8/18/74	Date of Test 11/17/74	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hrs	Tubing Pressure 2750#	Casing Pressure 40#	Choke Size 64/64"
Actual Prod. During Test 454	Oil - Bbls. 257	Water - Bbls. 197	Gas - MCF TSTM

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, 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.


(Signature)

Dist. Drlg. Supv.

(Title)

11/19/74

(Date)

OIL CONSERVATION COMMISSION

APPROVED

BY

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

