## NEW MEXICO OIL CONSERVATION COMMISSION Foton 7-104 SANTA FE Supersedes Old C-104 and C-110 REQUEST FOR ALLOWABLE Effective 1-1-65 FILE AND U.S.G.S AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS LAND OFFICE TRANSPORTER GAS OPERATOR PROBATION OFFICE ARCO Oil and Gas Company -Operator Division of Atlantic Richfield Company Address P. O. Box 1710, Hobbs, New Mexico Reason(s) for filing (Check proper box) Other (Please explain) Change in Operator Name New Well Change in Transporter of: effective: 4-1-79 Recompletion Oil Dry Gas Change in Ownership Casinghead Gas Condensate If change of ownership give name and address of previous owner \_\_\_\_ IL DESCRIPTION OF WELL AND LEASE State, Federa, or Fee Federal Ballard DE unch yater 7 Kivers 990 \_ Feet From The DOX , Township 205 Range 34E Line of Section NMPM. III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS O Twp. Pae. duces oil or liquids, If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Oil Well Plug Back Same Res'v. Diff. Res'v. Gas Well New Well Workover Designate Type of Completion - (X) Date Spudded P.B.T.D. Date Compl. Ready to Prod. Total Depth No Change Pool 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 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 Date of Test Producing Method (Flow, pump, gas lift, etc.) No Change Length of Test Tubing Pressure Casing Pressure Choke Size Actual Prod. During Test Cil-Bbls. Water-Bbls. Gas - MCF **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 Choke Size VI. CERTIFICATE OF COMPLIANCE OIL CONSERVATION COMMISSION APPROVED 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. BY SUPERVISOR DISTRICT TITLE.

District Prod. & Drlg. Supt.

(Title)

(Date)

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 RLLE 111.

This form is to be filed in compliance with RULE 1104.

All sections of this form must be filled our completely for allowable on new and recompleted wells.

County

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 olered wells.