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HO. OF COPIES REC	EIVED	<u> </u>	
DISTRIBUTION			
SANTA FE			
FILE			
u.s.g.s.			
LAND OFFICE		L	
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OFFICE			

District Prod. & Drlg. Supt.

NO. OF COSIES RECEIVED	┥	•	
DISTRIBUTION	NEW MEXICO OIL C	CONSERVATION COMMISSION	Form C-104
SANTA FE	REQUEST	FOR ALLOWABLE	Supersedes Old C-10; and C-110
FILE	<b>-</b>	AND ·	Effective 1-1-65
U.S.G.S.	AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL G	AS
LAND OFFICE	-  .		
TRANSPORTER OIL	<b>- </b>		
GAS	┥.		
OPERATOR	_		
PRORATION OFFICE			
Operator ARCO Oil and Ga	_ •		•
<u> </u>	antic Richfield Company		
Address	Walle New York 2004	^	
	Hobbs, New Mexico 8824		
Reason(s) for filing (Check proper box	· · · · · · · · · · · · · · · · · · ·	Other (Picase explain)	
New Well	Change in Transporter of:	Change in Operators Grant Change in Operators	
Recompletion	OII Dry Go		15
Change in Ownership	Casinghead Gas Conde	nsate	
If change of ownership give name			
and address of previous owner			
			•
DESCRIPTION OF WELL AND		me, Including Formation	Kind of Lease
	1 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7		State, Federal or Fee STO
State Y	Eun	ico Morument (G-519)	State, research of res State.
r ia	20 AL 10	10.2.	1
Unit Letter;	80 Feet From The North Lir	se and 1980 Feet From T	he West
35	<b>-</b>		
Line of Section 25 . To	waship ZoS Range	36 E . NMPM.	· Lea County
Name of Authorized Transporter of Ot.	TER OF OIL AND NATURAL GA	S Address (Give address to which approv	ed copy of this farm is an in
l	D.1 4 ·	10.0	IA -A -
None of Authorized Transporter of Ca		Address (Give address to which approv	aland, 1exes 79701
	· · · · · · · · · · · · · · · · · · ·		
Mullip Petroleum	<u>Co</u>	4001 Pentrook Da	esta, Texas 79762
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.	Is gas actually connected? Who	
Give location of tanks.	1C+F : 25 : 20 5 : 36E	1 geo	5-30-31
If this production is commingled wi	ith that from any other lease or pool,	give commingling order number:	<u> </u>
If this production is commingled wi			I Dive Post 16 Dec 1977
001497 DOWN 011 D 4 D 4	Oli Well Gas Well	New Well   Workover   Deepen	Plug Back Same Res'v. Diff. Res'v.
Designate Type of Completi	on (X)   Gas Well	New Well Workover Deepen	
Date Spudded	Oli Well Gas Well		Plug Back   Same Res'v. Diff. Res'v.
Designate Type of Completing Date Spudded No Change	on (X)   Gas Well   Gas Well   Otto Compl. Ready to Prod.	New Well Workover Deepen Total Depth	P.B.T.D.
Date Spudded	on (X)   Gas Well	New Well Workover Deepen	
Designate Type of Completing Date Spudded No Change	on (X)   Gas Well   Gas Well   Otto Compl. Ready to Prod.	New Well Workover Deepen Total Depth	P.B.T.D. Tubing Depth
Designate Type of Completing Date Spudded No Change	on (X)   Gas Well   Gas Well   Otto Compl. Ready to Prod.	New Well Workover Deepen Total Depth	P.B.T.D.
Designate Type of Completing Date Spudded No Change	On (X)    Date Compl. Ready to Prod.    Name of Producing Formation	Now Well Workover Deepen Total Depth Top O!1/Gas Pay	P.B.T.D. Tubing Depth
COMPLETION DATA  Designate Type of Completic Date Spudded No Change  Pool  Perforations	On (X)  Oti Well Gas Well  Date Compl. Ready to Prod.  Name of Producing Formation  TUBING, CASING, AND	New Well Workover Deepen  Total Depth  Top O!!/Gas Pay  CEMENTING RECORD	P.B.T.D.  Tubing Depth  Depth Casing Shoe
Designate Type of Completing Date Spudded No Change	On (X)    Date Compl. Ready to Prod.    Name of Producing Formation	Now Well Workover Deepen Total Depth Top O!1/Gas Pay	P.B.T.D. Tubing Depth
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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.

Carried and Charles

CADD 11979 CH COMPERNATION COUNT. PRESS & M.