NO. OF COPIES RE	CEI	VED	i L	
DISTRIBUTION				
SANTA FE				
FILE				
U.S.G.S.				
LAND OFFICE				
IRANSPORTER		OIL		
		G AS		
OPERATOR				
PRORATION OFFICE				
Cperator ARC	co	Oil	and	G

II.

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V.

V.

(Signature)

(Title)

(Date)

3-8-79

District Prod & Drlg Supt.

NEW MEXICO OIL CONSERVATION COMMISSION

Form C -104

SANIAFE	{ REQUES	T FOR ALLOWABLE	Supersedes Old C-104 and C-1			
FILE	-	AND Effective 1-1-65				
U.S.G.S.	_ AUTHORIZATION TO TR	RANSPORT OIL AND NATURAL G	AS			
OIL	-					
TRANSPORTER GAS						
OPERATOR	7					
PRORATION OFFICE		•	·			
Cperator ARCO Oil and (Gas Company -					
Division of A	lantic Richfield Compan	y				
Address						
), Hobbs, New Mexico 882					
Reason(s) for filing (Check proper bo	x)	Other (Please explain)				
New Well	Change in Transporter of:	Change in Operato	or Name			
Recompletion	Oil Dry C	$G^{as} = \left \text{effective: } 4-1-79 \right $	9			
Change in Ownership	Casinghead Gas Cond	ensate []				
If change of ownership give name						
and address of previous owner						
DESCRIPTION OF WELL AND	LEASE I Wall No i Book N	iame, Including Formation Eumont	Kind of Lease			
Ida A. White	J 17416	es Seven River Queen	State, Federal or Fee Fee			
200211011						
Unit Letter J : 23	O Feet From The EAST L	ine and <u>1650</u> Feet From T	he <u>304+h</u>			
Line of Section 35	20 C D	36E , NMPM, Le	n ·			
Line of Section 3.5	ownship 205 Range	JGE , NMPM, LET	County			
DESIGNATION OF TRANSPOR	TED OF OH AND NATIONS C	AC				
Name of Authorized Transporter of Ci	TER OF OIL AND NATURAL G	Address (Give address to which approve	ed copy of this form is to be sent!			
Name of Authorized Transporter of Co	So Pipeline CompAny stinghead Gas Tor Dry Gas	P. D. Box 1510, MidlAn Address (Give address to which approve	od TX 79702			
01	_					
Phillips Petroleu	Unit Sec. Twp. Rge.	Is gas actually connected? When	dessA, TX 79762			
If well produces oil or liquids, give location of tanks.	' ' '	•	.1			
	1 35 205 36E					
-	ith that from any other lease or pool	, give commingling order number:				
COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'r. Diff. Res'r			
Designate Type of Completi			, , , , , , , , , , , , , , , , , , , ,			
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.			
No Change						
Pool	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth			
Perforations			Depth Casing Shoe			
	-					
	TUBING, CASING, AN	D CEMENTING RECORD				
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			
			WORD CENTERY			
	· ·	<u> </u>				
		**************************************	-			
TEST DATA AND REQUEST F	OR ALLOWARIE (Test must be	after recovery of total volume of load oil a	nd must be sound to an automatical and			
OIL WELL	able for this	lepth or be for full 24 hours)	na mast be equal to or exceed top allow			
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	Cii-Bbis.	Water-Bbls.	Gas-MCF			
GAS WELL	<u>.</u>					
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate			
<u> </u>						
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size			
CERTIFICATE OF COMPLIAN	CE	OII CONSERVA	TION COMMISSION			
The state of the s		OIL CONSERVA	0-1079 //			
I hereby certify that the rules and	regulations of the Oil Conservation	APPROVED APK 1	0 1973			
Commission have been complied	with and that the information given	(de la	1/5/1/2			
	e best of my knowledge and belief.		GERO			
		TITLE STIDDOTTION	DICTDICT &			
<i>1</i> 1	` /	TITLE SUPERVISOR	DID! MICI			
\mathcal{U}	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 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.

RECEIVED

MAR 2 3 1979
OIL CONSERVATION COMM.
ROBBS. R. L.