SANTA FE	REQUEST FO	NSERVATION COMMISSION OR ALLOWABLE AND	Form C+104 Supersedes Old C-104 and C-110 Effective 1-1-65
U.S.G.S. LAND OFFICE IRANSPORTER GAS	4	SPORT OIL AND NATURAL (SAS
OPERATOR PRORATION OFFICE Creator ARCO Oil & Gas	Company		
	antic Richfield Company		
P. O. Box 1710, Reason(s) for filing (Check proper box New Woll Reconsistion Change in Ownership	Hobbs, New Mexico 88240 Change in Transporter of: Oil Dry Gas Casinghead Gas Condense	Other (Please explain) Change in Lease #1 (Blinebry Oi	e Name from J. R. Cone "A" 1 & Gas zone only) 79
If change of ownership give name and address of previous owner			
II. DESCRIPTION OF WELL AND Lease Name J. R. Cone A B	Well No. Pool Name	e, Including Fermation ory Oil & Gas	Kind of Lease State, Federal or Fee Fee
Location M . 661	0 Feet From The South Line	and 660 Feet From	TheWest
0		7E , NMPM,	Lea County
	TER OF OU AND NATURAL GAS		
Name of Authorized Transporter of Ca Name of Authorized Transporter of Ca Name of Authorized Transporter of Ca Northern Natural Gas Warren Petroleum Corp	ine Co. singhead Gas or Dry Gas XX Co. (HP Gas) oration (LP Gas)	Address (Give address to which appr P.O. Box 1510, Midland Address (Give address to which appr P.O. Box 3316, Midland P.O. Box 1589, Tulsa,	d, Texas oved copy of this form is to be sent) d, Texas Oklahoma
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Age. M 26 21S 37E	Yes	hen NNG 5-25-76 WAR 10-08-64
V. COMPLETION DATA		give commingling order number:	PC-228 Plug Back Same Res'v. Diff. Res'v.
Designate Type of Completi	on - (X) Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
·	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Pool			Depth Casing Shoe
Perforations			
HOLE SIZE	TUBING, CASING, AND CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
		3	
	and the second	1	·
V. TEST DATA AND REQUEST I OIL WELL Date First New Oil Bun To Tanks	FOR ALLOWARTE (Test must be af	fter recovery of total volume of load o pth or be for full 24 hours) Producing Method (Flow, pump, gas	il and must be equal to or exceed top allow- lift, etc.)
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Off-Bbis.	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 COMPLIA	 NCE	OIL CONSER	VATION COMMISSION
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.		APPROVED APR 25 1979	
		BY <u>Les Clements</u> Oil & Gas Insp.	
· • <u>-</u> -·		TITLE	
	gnature)	If this is a request for al well, this form must be eccom tests taken on the well in ac	
Engrg. Tech. Spec. (Title) 4-23-79		All sections of this form must be filled out completely for allow- able 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.	
	1999 - 1997 - 19		nust be filed for each pool in multiply

