

Le:

**X Special**

Reclassify to gas  
10-1-87

(Tilly)



STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT  
OIL CONSERVATION DIVISION  
HOBBS DISTRICT OFFICE

GARREY CARRUTHERS  
GOVERNOR

September 2, 1987

POST OFFICE BOX 1980  
HOBBS, NEW MEXICO 88241-1980  
(505) 393-6161

ARCO Oil & Gas Company  
Box 1710  
Hobbs, NM 88240

Attn: Kathryn Dickens

Re: State 367 #1-M Sec. 36, T21S, R37E  
Blinebry Oil & Gas Pool

Gentlemen:

We have had an inquiry from Northern Natural concerning the oil well classification of the above-referenced well. It appears the production being reported on this well would indicate it should be classified as a gas well.

If you concur that the well should be reclassified to a gas well, please submit a "special" Form C-116 requesting reclassification. If you feel the oil well classification is correct, please schedule a witnessed gas/oil ratio test for this well notifying Northern Natural and the Oil Conservation when the test is to be conducted.

Very truly yours,

OIL CONSERVATION DIVISION

Jerry Sexton (ed)  
Supervisor, District I

JS/ED/ed

cc: Northern Natural Gas Co.  
Attn: Mr. Rick Pankau  
P.O. Box 1188  
Houston, TX 77251-1188



STATE OF NEW MEXICO  
**ENERGY AND MINERALS DEPARTMENT**  
OIL CONSERVATION DIVISION  
HOBBS DISTRICT OFFICE

TONEY ANAYA  
GOVERNOR

October 15, 1986

POST OFFICE BOX 1980  
HOBBS, NEW MEXICO 88240  
(505) 393-6161

ARCO Oil & Gas Company  
Box 1710  
Hobbs, NM 88240

Re: Reclassification of Well  
State 367 #1-M  
Section 36, T21S, R37E  
Blinebry Oil and Gas Pool

Gentlemen:

Due to the recently submitted gas/oil ratio test for the above-referenced well, it will be reclassified as a gas well in the Blinebry Oil and Gas Pool effective January 1, 1987, and the oil allowable will be cancelled that date.

If for some reason you feel this test does not reflect the proper classification of the well, please submit another test for our consideration.

Please furnish this office with revised form C-102 outlining acreage dedicated to this gas well classification. Also, if the transporters change as a result of reclassification, please submit Form C-104 so indicating. Also, please advise this office if the gas is separately metered.

Very truly yours,

OIL CONSERVATION DIVISION

Jerry Sexton  
Supervisor, District I

ed

11-6-86 submitted new test - remains oil

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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	GAS		
OPERATOR			
PRORATION OFFICE			

OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-78  
Format 06-01-83  
Page 1

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator ARCO Oil and Gas Company - Division of Atlantic Richfield Company	
Address P. O. Box 1710, Hobbs, New Mexico 88240	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership	Change in Transporter of: <input type="checkbox"/> Oil <input checked="" type="checkbox"/> Casinghead Gas <input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate

If change of ownership give name  
and address of previous owner \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE Dual w/Drinkard

Lease Name State 367	Well No. 1	Pool Name, including Formation Blinbry Oil & Gas	Kind of Lease State, Federal or Fee State	Lease No. 367
Location Unit Letter <u>M</u> : <u>660</u> Feet From The <u>South</u> Line and <u>660</u> Feet From The <u>West</u> Line of Section <u>36</u> Township <u>21S</u> Range <u>37E</u> , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

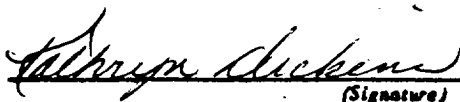
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Texas New Mexico Pipeline Company	Address (Give address to which approved copy of this form is to be sent) Box 2528, Hobbs, New Mexico 88240								
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Warren Petroleum Company	Address (Give address to which approved copy of this form is to be sent) Box 1589, Tulsa, Oklahoma 74102								
If well produces oil or liquids, give location of tanks.	<table border="1"> <tr> <td>Unit</td> <td>Sec.</td> <td>Twp.</td> <td>Rge.</td> </tr> <tr> <td>L</td> <td>36</td> <td>21S</td> <td>37E</td> </tr> </table>	Unit	Sec.	Twp.	Rge.	L	36	21S	37E
Unit	Sec.	Twp.	Rge.						
L	36	21S	37E						
	Is gas actually connected? <u>Yes</u> When <u>N/A</u>								

If this production is commingled with that from any other lease or pool, give commingling order number: PC-261

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

  
(Signature)

Services Supv.

(Title)

12/09/85

(Date)

OIL CONSERVATION DIVISION

APPROVED DEC 11 1985, 19\_\_\_\_  
BY Eddie W. Seay  
TITLE Oil & Gas Inspector

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.

#### 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	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.			
Elevations (DF, RKB, RT, CR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth			
Perforations						Depth Casing Shoe			
<b>TUBING, CASING, AND CEMENTING RECORD</b>									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT			

#### V. TEST DATA AND REQUEST FOR ALLOWABLE (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.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

#### GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

RECEIVED  
DEC 10 1985  
O.C.D.  
HOBBS OFFICE



TONEY ANAYA  
GOVERNOR

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT  
OIL CONSERVATION DIVISION  
HOBBS DISTRICT OFFICE

October 17, 1985

50 YEARS



1935 - 1985

POST OFFICE BOX 1980  
HOBBS, NEW MEXICO 88240  
(505) 393-6161

ARCO Oil & Gas Company  
P. O. Box 1710  
Hobbs, New Mexico 88240

Gentlemen:

Due to the recently submitted gas-oil ratio test for the Blinebry zone in your State 367 Well No. 1 located in Unit M of Section 36, T-21-S, R-37-E, it will be reclassified from gas to oil in the Blinebry Oil & Gas Pool effective January 1, 1986, and the gas allowable will be cancelled that date.

Yours very truly,

OIL CONSERVATION DIVISION

Jerry Sexton  
Supervisor, District 1

mc

## OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501Form C-103  
Revised 10-1-78

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5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	
367	

## SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.  
USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)

1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- Dual Oil/Gas		7. Unit Agreement Name
2. Name of Operator ARCO Oil and Gas Company Division of Atlantic Richfield CO.		8. Farm or Lease Name State 367
3. Address of Operator P.O. Box 1710, Hobbs, NM 88240		9. Well No. 1
4. Location of Well UNIT LETTER <u>M</u> <u>660</u> FEET FROM THE <u>South</u> LINE AND <u>660</u> FEET FROM <u>West</u> <u>36</u> LINE, SECTION <u>21S</u> TOWNSHIP <u>37E</u> RANGE <u>37E</u> NMPM.		10. Field and Pool, or Wildcat Blinebry Oil and Gas Drinkard
15. Elevation (Show whether DF, RT, GR, etc.) 3361'GR		12. County Lea

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO:PERFORM REMEDIAL WORK ☐  
TEMPORARILY ABANDON ☐  
PULL OR ALTER CASING ☐  
OTHER ☐PLUG AND ABANDON ☐  
CHANGE PLANS ☐REMEDIAL WORK ☐  
COMMENCE DRILLING OPNS. ☐  
CASING TEST AND CEMENT JOBS ☐  
OTHER ☒ pipe casing to ground levelALTERING CASING ☐  
PLUG AND ABANDONMENT ☐

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Dug cellar out to 13 3/8" casing head. Piped 13 3/8" casing & 8 5/8" casing to top of ground w/2" pipe, installed 2" valves, marked 13 3/8" valve w/SUR and 8 5/8" valve w/INT. Piped 5 1/2" casing to top & marked w/prod. Work inspected by Mr. Ron Castleberry w/NMOCD on 4/20/83.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED D. L. Shackelford TITLE Engrg. Tech. Spec. DATE 4/22/83APPROVED BY Ronald Castleberry TITLE OIL & GAS INSPECTOR DATE APR 25 1983

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED  
APR 22 1983  
O.C.D.  
ACCESS OFFICE