NO. OF COPIES RECEIVED		SERVATION COMMISSION	Form C-104		
DISTRIBUTION SANTA FE		DR ALLOWABLE	Supersedes Old C-104 and C-110		
FILE		AND	Effective 1-1-65		
U.S.G.S.	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS				
LAND OFFICE					
TRANSPORTER OIL					
GAS					
OPERATOR					
I. PRORATION OFFICE	D				
Operator ARCO Cil and Gas Division of Atlantic Richfiel	Company				
Address	d Company				
Box 1710, Hobbs, New Me	exico 88240				
Reason(s) for filing (Check proper box)		Other (Please explain)			
New Well	Change in Transporter of:	r			
Recompletion	Oil Dry Gas				
Change in Ownership	Casinghead Gas Condensa				
If change of ownership give name					
and address of previous owner					
- PERCENTEN OF WELL AND	EASE Dual w/Blinebry	y Oil & Gas	N		
II. DESCRIPTION OF WELL AND	Well No. Pool Name, Including For	mation Kind of Lease	Lease No.		
State 367	1 Drinkard	State, Federal or	Fee State 367		
Location					
Unit Letter M; 66	OFeet From TheSouth_Line	and 660 Feet From The	West		
Unit Letter		_	County		
Line of Section 36 Tou	wnship 21S Range 3	7E , NMPM, Lea			
II. DESIGNATION OF TRANSPOR			copy of this form is to be sent)		
Name of Authorized Transporter of Oll Texas New Mexico Pipel	ine Co.	Box 2528, Hobbs, N.M. 882	240		
Name of Authorized Transporter of Ca		Address (Give address to which approved	l copy of this form is to be sent)		
Warren Petroleum Co.		Box 1589, Tulsa, Oklahoma	a		
	Unit Sec. Twp. Rge.	Is gas actually connected? When			
If well produces oil or liquids, give location of tanks.	L 36 21S 37E	Yes	1/1/58		
If it is modulation is commingled wi	th that from any other lease or pool, g	ive commingling order number: P(C-261		
IV. COMPLETION DATA		New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.		
Designate Type of Completi	OII Well Gub well		X		
_			P.B.T.D.		
DrockSphitcher W.O. Commenced	7/16/79	6542'	6508'		
4/30/79 Elevations (DF, RKB, RT, GR, etc.)		Top Oil/Gas Pay	Tubing Depth		
Elevations (DF , RRB , RT , GR , $etc.)3361' GR$	Drkd	6297'	6245'		
Perforations			Depth Casing Shoe		
6297-6387' & 6424-6489'			6541'		
	TUBING, CASING, AND	CEMENTING RECORD	SACKS CEMENT		
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	300		
17'2"	13-3/8" OD	297'	1000		
10-3/4"	8-5/8" OD	<u>2799'</u> 6530'	400		
7-7/8"	5½ UD	5451' & 6245' (Dual			
	<u>2-1/16" OD</u>	iter recovery of total volume of load oil and	nd must be equal to or exceed top allou		
V. TEST DATA AND REQUEST I	FOR ALLOWABLE (lest must be a) able for this dej	nth or be for juli 24 nours)			
OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift,	, etc.)		
5/6/79	7/16/79	Flow	Choke Size		
D/0/79 Length of Test	Tubing Pressure	Casing Pressure			
24 hrs	110#	Pkr Water-Bbls.	64/64"		
Actual Prod. During Test	Oil-Bbls.	Water-Bois.	323		
24 bbls	16	0			
GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate		
Actual Prod. Test-MCF/D	Longin Di Pili				
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size		
		<u> </u>			
VI. CERTIFICATE OF COMPLIANCE		OIL CONSERVA			
		JUL 2	4 19 79 , 19		
I hereby certify that the rules an	d regulations of the Oil Conservation	APPROVED, is			
I hereby certify that the rules and regulations of the information given Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		APPROVED JUL 2 4 1979, 19 BY Orig. Signed by Les Clements			
above is true and complete to					
SALL IN			compliance with RULE 1104.		
SRKfor L. D. (ANK-		If this is a request for allowable for a newly drilled or deepend the deviation of the deviation of the deviation of the deviation			
	ignature)	All sections of this form must be filled out completely for allow able on new and recompleted wells.			
Dist. Drlg. Supt.	\\\\\\\				
	(Title)		TTT and TT for changes of Uwite		
7/18/79		Fill out only Sections 1, 11, 111, and vi to change of condition well name or number, or transporter, or other such change of condition			

(Date)

Separate Forms C-104 must be filed for each pool in multiply completed wells.

DISTRIBUTION	P. O. BO	OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501		Form C Revise	-103 d 10-1-7
FILE U.S.O.S. LAND OFFICE UPCRATOR				a, Indicate Type of Letse State X , State OII & Gas Letse N	For
	DRY NOTICES AND REPORTS OF	N WELLS back to a different reservo ich proposals.1	167	Unit Agreement Name	
	ethic Richfield Company			, Farm or Lease Name State 367 , Well No.	
Address of Cherator Box 1710, Hobbs, New	Mexico 88240			1 0. Field and Pool, or WHd	cat
Location of Wall	660 FECT FROM THE Sout	h LINE AND 660	FEET FROM	Blinebry/Drink	ard
THE West LINE, SEC	TION 36 TOWNSHIP 21		A	12. County	
	177777	' GR		Lea	
	k Appropriate Box To Indicate INTENTION TO:	Nature of Notice, Rep SUB	SEQUENT	r Data REPORT OF:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK COMMENCE DRILLING OPHS.	1755 N	ALYERING CASING Plug and Abande	<u> </u>
OTHER		OTHER Add Perfs		ones & Treat	[X

RU 4/30/79. Killed well, inst BOP, POH w/compl assy. RIH w/mill, milled over & pushed Model D pkr 6380' to 6498'. Model D caught inside mill & rec, no junk in hole. Perf'd 6297, 6304, 06, J 16, 20, 23, 27, 30, 38, 40, 48, 70, 80, 87' (15 holes) 1 JSPF. RIH w/5½" RTTS pkr & RBP, set BP 6406'. Reset BP @ 5609'. Perforated add'l Blinebry 5496, 5504, 10, 20, 25, 29, 33, 40, 45, 49, 55, 64, 68, 71, 86, 89, 93, 5597' (18 holes) 1 JSPF. RIH w/pkr, set @ 5440'. Acid frac'd Bly pc 5496-5597' w/4000 gal 15% NE-HCL, 18,000 gal Versagel 1400, 18,000 gal 20% NE-HCL, 9 RCN ball sealers. Swbd back load & kicked off flwg. POH w/pkr. Washed sd off BP. POH w/BP. RIH w/dual compl assy as follows: Drkd zone consists of 197 jts 2-1/16" 3.4# tbg w/parallel anchor @ 5452' Model L 2-3/8" x 1.50" sliding sleeve @ 6245' & btm of seals @ 6250'. Bly zone consists of 170 j 2-1/16" 3.25# tbg w/"J" latch @ 5451'. On 24 hr potential test 7/16/79 flwd Blinebry zone 5496-5838' 14 BO, 3 BW & 237 MCFG on 64/64" ck, 90# FTP, GOR 16,929:1. On 24 hr potential test 7/16/ flwd Drkd zone 6297-6489', 16 BO, 8 BW & 323 MCFC on 64/64" ck, 110# FTP, GOR 20,188:1. Final Report.

16. I hereby certify that the information above is true and complete	e to the best of my knowledge and belles.	
Slkfor L.D. LANE	nuc <u>Dist Drlg. Supt.</u>	DATE 7/18/79
Orig. Signed by Les Clements	TITLE	JUL 24 1979
APPROVED LY		

CONDITIONS OF APPROVAL, IF ANYI