

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

District I
PO Box 1940, Hobbs, NM 88241-1900
District II
PO Drawer DD, Artesia, NM 88211-0719
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
PO Box 2088, Santa Fe, NM 87504-2088

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

¹ Operator name and Address ARC() Permian P.O. Box 1710 Hobbs, New Mexico 88240		² OGRID Number 000990
		³ Reason for Filing Code CG 12/94
⁴ API Number 30-025-08895	⁵ Pool Name EUMONT YATES SRQ	⁶ Pool Code 76480
⁷ Property Code 001525	⁸ Property Name STATE 157 D	⁹ Well Number 7

II. Surface Location

UI or lot no. N	Section 12	Township 22S	Range 36E	Lot. Idn	Feet from the	North/South Line S	Feet from the	East/West line W	County LEA
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Bottom Location

UL or lot no.	Section	Township	Range	Lot. Idn	Feet from the	North/South Line	Feet from the	East/West line	County
¹² Lse Code S	¹³ Producing Method Code F	¹⁴ Gas Connection Date 12/01/94	¹⁵ C-129 Permit Number	¹⁶ C-129 Effective Date	¹⁷ C-129 Expiration Date				

III. Oil and Gas Transporters

¹⁸ Transporter OGRID 009171	¹⁹ Transporter Name and Address GPM GAS CORPORATION 4001 PENBROOK ODESSA, TX 79762	²⁰ POD 0470730	²¹ O/G G	²² POD ULSTR Location and Description I-12-22S-36E

IV. Produced Water

²³ POD	²⁴ POD ULSTR Location and Description
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V. Well Completion Data

²⁵ Spud Date	²⁶ Ready Date	²⁷ TD	²⁸ PBSD	²⁹ Perforations
³⁰ Hole Size	³¹ Casing & Tubing Size	³² Depth Set	³³ Sacks Cement	

VI. Well Test Data

³⁴ Date New Oil	³⁵ Gas Delivery Date	³⁶ Test Date	³⁷ Test Length	³⁸ Tbg. Pressure	³⁹ Csg. Pressure
⁴⁰ Choke Size	⁴¹ Oil	⁴² Water	⁴³ Gas	⁴⁴ AOF	⁴⁵ Test Method

⁴⁶ I, the undersigned, certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. Signature: <i>Kelli D. Murrish</i> Print Name: KELLI D. MURRISH Title: ADMINISTRATIVE ASSISTANT Date: 12 20 94 Phone: 541-1649		OIL CONSERVATION DIVISION Approved by: _____ Title: _____ Approval Date: _____	
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⁴⁷ If this is a change of operator fill in the OGRID number and name of the previous operator			
Previous Operator Signature	Printed Name	Title	Date

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CO D HOBBS
OFFICE