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ſ	NO. OF COPIES RECI			
	DISTRIBUTIO			
	SANTA FE			
	FILE			
	U.S.G.S.			
	LAND OFFICE			
	TRANSPORTER	OIL		
	TRANSPORTER	GAS		
	OPERATOR			
ı.	PRORATION OF			
	Operator ARCO (Gas	Co	

(Date)

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65

L	FILE			_			AND			2	1 03	
	u.s.g.s.		_		AUTHORIZATION TO	TRAN	USPORT	OIL AND	NATURAL G	AS		
-	LAND OFFICE		_									
1	TRANSPORTER -	OIL		\dashv								
-	OPERATOR	GAS		\dashv								
ı. İ	PRORATION OFFIC	CE	\dashv	\dashv								
•	Operator ARCO Oi	1 & 0	Gas	Co	mpany							
L		Division of Atlantic Richfield Company										
	ddress											
	P.O. Box 1710				.M. 88240			Other (Please	explain)			
	Reason(s) for filing (C. New Well	neck pro	oper ()OX)	Change in Transporter of:			'	• •	ole DHC-317	dtd 7-16-80	
	Recompletion	7				ry Gas			e 8-6-80.	010 010		
	Change in Ownership				Casinghead Gas C	ondens	sate 🔲					
L												
	If change of ownershi and address of previo			-								
II.	DESCRIPTION OF Lease Name	WELL	AN	<u>D</u> L	Well No. Pool Name, Includi	ing Fo	rmation		Kind of Lease		Lease No.	
	State 367				4 Tubb & Bli	nebr	v Oil	& Gas	State, Federal	or Fee Stat	e 367	
Ì	Location											
	Unit Letter J	ı,		19	80 Feet From The South	Line	and	1980	Feet From T	he <u>East</u>		
	<u></u>											
	Line of Section 3	36		Tow	nship 21S Range	.	37E	, NMPN	·	Lea	County	
					OP OF AND MATTIDAT	CAS	2					
II.	DESIGNATION OF	ESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Game of Authorized Transporter of Oil									i is to be sent)	
	Texas New Mex					ļ	Box 2528, Hobbs, N.M. 88240					
	Name of Authorized To	ransport	er of	Casi	inghead Gas X or Dry Gas		Address	(Givé address	to which approv	ed copy of this form	is to be sent)	
	Warren Petrol	Leum (Co.						a, Oklahor	na		
	If well produces oil or	r liquids	,		Unit Sec. Twp. Rge	i	Is gas actually connected? When					
	give location of tanks				<u> </u>	7E		<u>Yes</u>		8-12-80		
			gled	with	h that from any other lease or p	pool, g	give com	mingling orde	r number:	PC 261		
V.	COMPLETION DA				Oil Well Gas W	ell	New Wel	Workover	Deepen	Plug Back Same	Res'v. Diff. Res'v.	
	Designate Type	e of Co	mple	etio	n - (X)		! !	. i				
	Date Spudded				Date Compl. Ready to Prod.		Total De	epth		P.B.T.D.		
							- OI	(G D		Tubing Depth		
	Elevations (DF , RKB ,	, RT, GR	₹, etc	•)	Name of Producing Formation	ļ	Top Oil/	/Gas Pay		Tubing Depth		
	Defeations						L			Depth Casing Sho	e	
	Perforations								•			
	TUBING, CASING, AND CEMENTING RECORD											
	HOLES	SIZE			CASING & TUBING SIZE	<u>=</u>		DEPTHS	ET	SACKS	CEMENT	
												
					•					 		
							 			<u> </u>		
.,	TEST DATA AND	DEAL	EST	r EC	OP ALLOWARIE (Test mus	t be at	fter recove	ery of total vol	ume of load oil	and must be equal t	o or exceed top allow-	
٧.	OIL WELL	REQU	, E. G. I		able for t	his de	pth or be.	for full 24 how	s)			
	Date First New Oil R	un To T	an k s		Date of Test		Producing Method (Flow, pump, gas lift, etc.)					
							Castna	Pressure		Choke Size		
	Length of Test				Tubing Pressure		Cusing	F1000m0				
	Astrol Dood Dustra	Test			Oil-Bbls.		Water - E	Bbls.		Gas-MCF		
	Actual Prod. During											
	I											
	GAS WELL		<u> </u>				1 = : :			Community of Co.	nagle	
	Actual Prod. Test-M	ICF/D			Length of Test		Bbls. C	ondensate/MM	CF	Gravity of Conde	Ascte	
					Tubing Pressure (Shut-in)		Castna	Pressure (Shu	t-in)	Choke Size		
	Testing Method (pito	t, back ;	pr. <i>)</i>		I doing Pressure (SAUC-11)		Cabing		•			
				A 314	dr.		1	OIL	CONSERVA	ATION COMMIS	SION	
VI.	CERTIFICATE OF COMPLIANCE							- A	IOON			
	I haveby certify the	hereby certify that the rules and regulations of the Oil Conservation					APP	. 19				
I hereby certify that the fulles and regulations of the Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.							Orig. Signed by John Runyan					
						Geologist						
	İ											
	<i>A</i> -							This form is to be filed in compliance with RULE 1104.				
	Dr. L. s	D. L. Shackelford						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				
		(Signature)						tests taken on the well in accordance with RULE 111.				
	Engrg. Tech.	Engrg. Tech. Spec.						Att sections of this form must be filled out completely for allow-				
	9-5-80			(11	/		able on new and recompleted wells. Fill out only Sections I, II, III, and VI for changes of owner,					
	メーコーのU	(Date)						well name or number, or transporter, or other such change of condition.				

well name or number, or transporter, or other such change of control Separate Forms C-104 must be filed for each pool in multiply completed wells.