

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

OFFICE OF THE COMMISSIONER	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.O.S.	
LAND OFFICE	
TRANSPORTER	OIL
	NATURAL GAS
OPERATOR	
PRODUCTION OFFICE	

Operator ARCO Oil and Gas Company
Division of Atlantic Richfield Co.

Address P. O. Box 1710, Hobbs, N M 88241-1710

Reason(s) for filing (Check proper box)

New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

Other (Please explain)

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name State 731	Well No. 3	Pool Name, Including Formation Jalmat Yates 7-Rivers Queen	Kind of Lease State, Federal or Fee State	Lease No. E-8077
Location Unit Letter H : 1980 Feet From The North Line and 330 Feet From The East Line of Section 26 Township 22S Range 35E, NMPM, Lea County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Navajo Crude Oil Purchasing Co.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 175, Artesia, N M 88210	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum Co.	Address (Give address to which approved copy of this form is to be sent) 4001 Penbrook, Odessa, Tx 79762	
If well produces oil or liquids, give location of tanks.	Unit L Sec. 25 Twp. 22 Rge. 35	Is gas actually connected? When Yes 2/17/82

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

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> New Well <input checked="" type="checkbox"/> Workover <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Same Res'v. <input type="checkbox"/> Diff. Res'v. <input type="checkbox"/>		
Date Spudded 11/26/81	Date Compl. Ready to Prod. 2/17/82	Total Depth 4055'	P.B.T.D. 4009'
Elevations (DF, RKB, RT, GR, etc.) 3558.2' GR	Name of Producing Formation Yates 7-Rivers	Top Oil/Gas Pay 3780'	Tubing Depth 3796'
Perforations 3874, 77, 80, 83, 86, 89, 92 3780, 83, 89, 92, 95, 98, 3808, 11, 24, 27, 3834, 37, 40, 43, 46'		Depth Casing Shoe 4054'	

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2"	14" Conductor Pipe	30'	2 1/2 yds Redi mix
12 1/4"	8-5/8" OD	1735'	825
7-7/8"	5 1/2" OD	4054'	1000
	2-3/8" OD	3796'	

TEST DATA AND REQUEST FOR ALLOWABLE
OIL WELL

(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)

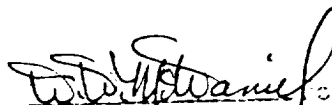
Date First New Oil Run To Tanks 1/31/82	Date of Test 2/24/82	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hrs	Tubing Pressure -	Casing Pressure -	Choke Size -
Actual Prod. During Test 180 bbls	Oil-Bbls. 95	Water-Bbls. 85	Gas-MCF 28

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

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 above is true and complete to the best of my knowledge and belief.


for J. W. Williams

(Signature)

Dist. Dir. Supt.

(Title)

2/25/82

(Date)

OIL CONSERVATION DIVISION

APPROVED _____, 19

BY ORIGINAL SIGNED BY

TITLE

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 Form C-104 must be filed for each pool in multiple completed wells.