NO. OF COPIES REC	EIVED	L_	
DISTRIBUTION			
SANTA FE			
FILE			
u.s.g.s.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OF			
Operator ARCO	Oil	and	Gas

	DISTRIBUTION	NEW MEXICO OIL (CONSERVATION COMM SSION	Form C. Los			
	SANTA FE	•	FOR ALLOWABLE	Form C-104 Supersedes Old C-104 and C-110			
	FILE	REGUEST	AND	Effective 1-1-65			
	U.S.G.S.	ALITHOPIZATION TO TRA	ANSPORT OIL AND NATURAL G	245			
	LAND OFFICE	AUTHORIZATION TO TRA	AND ON TOLE AND MATORIAL C				
	OIL	7					
	TRANSPORTER GAS	1	•				
	OPERATOR	1					
	PRORATION OFFICE	†					
ı.	Operator ARCO Oil and Ga	s Company -					
		antic Richfield Company		•			
	Address						
	P. O. Box 1710.	Hobbs, New Mexico 8824	0	·			
	Reason(s) for filing (Check proper box		Other (Please explain)	· · · · · · · · · · · · · · · · · · ·			
	New Well	Change in Transporter of:	Change in Operate	or Name			
	Recompletion	OII Dry Go					
	Change in Ownership	Casinghead Gas Conde	nsate				
	If change of ownership give name						
	and address of previous owner						
	-						
u.	U. DESCRIPTION OF WELL AND LEASE						
	Lease Name		ime, Including Formation	Kind of Lease			
	State E	Elis	uce monument (G-SA)	State, Federal or Fee State			
	Location	Center of NE/SW					
	Unit Letter . Feet From The Line and Feet From The						
	Unit Letter		10 414				
	Line of Section 5 , To	waship 2/5 Range 3	36E , NMPM,	Loa County			
				No. Commy			
11	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	18	•			
14.	Name of Authorized Transporter of Oil		Address (Give address to which approx	ped copy of this form is to be sent!			
	D. 1.0. P		1/2 . 1 - 11	1 500 7874			
	Name of Authorized Transporter of Ca	singhead Gas or Dry Gas	Address (Give address to which approv	yed conv of this form is to be sent			
	10/01/1/2	A)		,			
	Phllep Petroleum	Unit Sec. Twp. P.ge.	Is gas actually connected? When	desta, lexas 79762			
	If well produces oil or liquids,	Unit Sec. Twp. Rge.		" <i>-5-25-36</i>			
	give location of tanks.	19+1: 2 1912:20E	yes:	<i>⇒ -</i> 42 - 26			
	If this production is commingled wi	th that from any other lease or pool,	give commingling order number:				
V.	COMPLETION DATA						
	Designate Type of Completic	Oti Well Gas Well	New Well Workover Deepen	Plug Back 'Same Resty.' Diff. Resty.			
		<u>i</u>					
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.			
	No Change						
	Pool	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth			
	Perforations			Depth Casing Shoe			
	·	· · · · · · · · · · · · · · · · · · ·	·				
. :		TUBING, CASING, AND	D CEMENTING RECORD				
	HOLE SIZE		DEPTH SET	SACKS CEMENT			
	l Horr size	CASING & TUBING SIZE		SACKS CEMENT			
	HOLL SIZE	CASING & TUBING SIZE		SACKS CEMENT			
	Hote size	CASING & TUBING SIZE	· · · · · · · · · · · · · · · · · · ·	SACKS CEMENT			
	11000 3120	CASING & TUBING SIZE		SACKS CEMENT			
	11000 3120	CASING & TUBING SIZE		JACKS CEMENT			
v							
	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a	fter recovery of total volume of load oil opth or be for full 24 hours)				
		OR ALLOWABLE (Test must be a	fter recovery of total volume of load oil o	and must be equal to or exceed top allow-			
	TEST DATA AND REQUEST FOOIL WELL Date First New Oil Run To Tanks	OR ALLOWABLE (Test must be a able for this de	fter recovery of total volume of load oil o pth or be for full 24 hours)	and must be equal to or exceed top allow-			
	TEST DATA AND REQUEST FOOLL WELL. Date First New Oil Run To Tanks No Change	OR ALLOWABLE (Test must be a able for this de	fter recovery of total volume of load oil of pth or be for full 24 hours) Producing Method (Flow, pump, gas lif	and must be equal to or exceed top allow-			
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	TEST DATA AND REQUEST FOOL WELL Date First New Oil Run To Tanks No Change Length of Test	OR ALLOWABLE (Test must be a able for this de Date of Test Tubing Pressure	fter recovery of total volume of load oil of the pth or be for full 24 hours) Producing Method (Flow, pump, gas life Casing Pressure	and must be equal to or exceed top allow-			
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	TEST DATA AND REQUEST FOOL WELL. Date First New Oil Run To Tanks No Change Length of Test Actual Prod. During Test	OR ALLOWABLE (Test must be a able for this de Date of Test Tubing Pressure	fter recovery of total volume of load oil of the pth or be for full 24 hours) Producing Method (Flow, pump, gas life Casing Pressure	and must be equal to or exceed top allow-			
	TEST DATA AND REQUEST FOOL WELL Date First New Oil Run To Tanks No Change Length of Test Actual Prod. During Test GAS WELL	OR ALLOWABLE (Test must be a able for this de Date of Test Tubing Pressure Oti-Bbls.	fter recovery of total volume of load oil of pth or be for full 24 hours) Producing Method (Flow, pump, gas lif Casing Pressure Water-Bbls.	and must be equal to or exceed top allow- i, etc.) Choke Size Gas-MCF			
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(Tide) 3-7-79

& Drlg. Supt.

District Prod.

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.