

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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TRANSPORTER	OIL
	GAS
OPERATOR	
PROMOTION OFFICE	

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
ARCO Oil and Gas Company - Div of Atlantic Richfield Company

Address
P. O. Box 1710, Hobbs, New Mexico 88240

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	<input type="checkbox"/> Condensate
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	

Other (Please explain)
Additional gas transporter

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name State 176	Well No. 5	Pool Name, Including Formation Eumont Yates 7Rivers Qn	Kind of Lease State, Federal or Fee State	Lease No.
Location Unit Letter <u>D</u> : <u>330</u> Feet From The <u>West</u> Line and <u>990</u> Feet From The <u>North</u> Line of Section <u>19</u> Township <u>21S</u> Range <u>36E</u> , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Shell Pipeline Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1910, Midland, Texas 79701
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> EFFECTIVE <input type="checkbox"/> Phillips Petroleum Company, 4001 E. Pantyway, Odessa, Texas 79762 Cotton Oil Company, 1231 P. O. Box 1231, Midland, Texas 79702	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1231, Midland, Texas 79702
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
Unit <u>D</u> Sec. <u>19</u> Twp. <u>21S</u> Rge. <u>36E</u>	Yes Approx. 5/1954

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

NOTE: Complete Parts IV and V on reverse side if necessary.

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

Walter M. McKenna
(Signature)
Services Supv.
(Title)
5/8/87
(Date)

OIL CONSERVATION DIVISION
APPROVED MAY 11 1987, 19
BY James S. [Signature]
TITLE DISTRICT 1 SUPERVISOR

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