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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-11.
Effective 1-1-85

Operator ARCO Oil and Gas Company Division of Atlantic Richfield Co.	
Address P.O. Box 1710, Hobbs, NM 88240	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input checked="" type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE		Lease No.
Lease Name Roy Barton	Well No. 2	Pool Name, Including Formation Wantz Abo
Kind of Lease State, Federal or Fee		Fee
Location		
Unit Letter B	: 660 Feet From The North Line and 1980 Feet From The East	
Line of Section 23	Township 21S	Range 37E
, NMPM,		Lea County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS		Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Texas New Mexico Pipeline Co.		
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Warren Petroleum Corp.		
If well produces oil or liquids, give location of tanks.	Unit H	Sec. 23	Twp. 21
			Rge. 37
Is gas actually connected?		When	10-29-84
Yes			

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

V. COMPLETION DATA		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Designate Type of Completion - (X)		X			X				X
Date Spudded WO commenced 9-26-84	Date Compl. Ready to Prod. 11-8-84	Total Depth 7350'		P.B.T.D. 7240'					
Elevations (DF, RKB, RT, GR, etc.) 3406' GR	Name of Producing Formation Abo	Top Oil/Gas Pay 6862'		Tubing Depth 6831'					
Perforations 6862-6868 & 6906-6911'				Depth Casing Shoe 7349'					

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2"	13-3/8" OD	305'	300
12 1/4"	9-5/8" OD	2802'	1000
6"	5-1/2" OD	7349'	573
	2-3/8" OD	6831'	

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of loud 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 10-29-84	Date of Test 12-12-84	Producing Method (Flow, pump, gas lift, etc.) Flwg	
Length of Test 24 hrs	Tubing Pressure 23#	Casing Pressure Pkr	Choke Size 64/64"
Actual Prod. During Test 25 bbls	Oil - Bbls. 25	Water - Bbls. 0	Gas - MCF 73

GAS WELL		Bbls. Condensate/MMCF	Gravity of Condensate
Actual Prod. Test-MCF/D	Length of Test		
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Elizabeth S. Bush
(Signature)
Drilling Engineer
(Title)
12-17-84
(Date)

OIL CONSERVATION COMMISSION
DEC 27 1984
APPROVED _____, 19____
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 deviated 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 multiple completed wells.