[NO. OF COPIES RECEIVED				
	DISTRIBUTION		NSERVATION COMMISSION	Form C-104 Supersedes Old C-104 and C-110	
ł	SANTA FE	REQUEST F	OR ALLOWABLE	Effective 1-1-65	
ŀ	U.S.G.S.	AUTHORIZATION TO TRAN	SPORT OIL AND NATURAL GA	S	
ľ	LAND OFFICE				
	TRANSPORTER OIL GAS				
1.	OPERATOR PRORATION OFFICE				
	Atlantic Richfield Comp	any			
	Address				
	P. O. Box 1978, Roswell	, New Mexico 88201	Other (Please explain)		
	Reason(s) for filing (Check proper box) New Well	Change in Transporter of:			
:	Recompletion X	Oil Dry Gas			
	Change in Ownership	Casinghead Gas Condens	sate	· .	
	If change of ownership give name				
	and address of previous owner				
11.	DESCRIPTION OF WELL AND L	EASE	rmation Kind o: Lease	Lease No.	
	Lease Name	Well No. Fool Name, Including Fo 3 Blinebry Oil	State, Federal	or Fee Fee	
	Roy Barton	3 Billebiy Oli	· · · · · · · · · · · · · · · · · · ·	· ·	
H 1980 Feet From The North Line and 660 Feet From The East				e East	
		nship 21-S Range 3	37-Е , ммрм, Lea	a County	
111.	DESIGNATION OF TRANSPORT Name of Authorized Transporter of Oll	ER OF OIL AND NATURAL GAS	Address (Give address to whick approve	ed copy of this form is to be sent)	
	Texas-New Mexico Pipel	ine Company	P. O. Box 1510, Midland,	, Texas 79701	
	Name of Authorized Transporter of Casi	inghead Gas 🔏 or Dry Gas 🗍	Address (Give address to which approve P. O. Box 1589, Tulsa, (
	Warren Petroleum Corpor		Is gas actually connected? When		
	If well produces oil or liquids, give location of tanks.	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$		1-15-70	
	If this production is commingled with	h that from any other lease or pool,	give commingling order number:]	PC-66	
IV	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.	
	Designate Type of Completio			XX	
	Date Spudded	Date Compl. Ready to Prod.	Total Depth 7993	P.B.T.D. 6410'	
	1-6-53	1-15-70 Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
	Elevations (DF, RKB, RT, GR, etc.) 3404' GR	Blinebry	5769	5747'	
	Perforations 5769, 80, 5805, 09, 13, 76, 83, 88, 96, 5900, 08, 16, 28, Depth Casing Shoe				
	72, 89, 94, 6000, 70, 88, & 92 (20 holes) 7348 TUBING, CASING, AND CEMENTING RECORD				
		CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
	HOLE SIZE	13 3/8"	306'	350	
	11"	8 5/8"	2810'	1200 500	
	7 7/8"	5½" 2 1/16" tubing	5747'		
-	TOT DATA AND DEOUTET T	OP ALLOWABLE (Test must be a	ifter recovery of total volume of load oil (and must be equal to or exceed top allow-	
V	able for this depth or be for full 24 hours) OIL WELL				
	Date First New Oil Run To Tanks	Date of Test 1-20-70	Flow		
	1-15-70 Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
	24 hrs	40-160	packer	- Gas • MCF	
	Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	106	
	89 bb1.	70			
	GAS WELL				
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
	Testing Method (pitol, back pity				
v	1. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION		
-			APPROVED		
	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.		BY SUPERVISOR DISTRICT		
	J. B. Hulbard Jr. 14		This form is to be filed in compliance with RULE 1104.		
	J. B. Hubbard h. Dit		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 allow- able on new and recompleted wells.		
	Acctg. Mat'l. Supvr. (Title)				
	January 26, 1970		Fill out only Sections I. II. III, and VI for changes of owner, well some or number, or transporter, or other such change of condition		
	(C	(Date)		Separate Forma C-104 must be filed for each pool in multiply	
			completed wells.		