DISTRIBUTION SANTA FE		_ CONSERVATION COMMISSION ST FOR ALLOWABLE	Form C-184 Supersedes Old C-104 and C-1
FILE U.S.G.S. LAND OFFICE	·	AND RANSPORT OIL AND NATURAL GAS	Effective 1-1-65
TRANSPORTER OIL GAS OPERATOR			
PRORATION OFFICE Cperator ARCO Oil and Ga	S Company - antic Richfield Compan	у	
Address P. O. Box 1710,	Hobbs, New Mexico 88	240	
Reason(s) for filing (Check proper box New Well Recompletion Change in Ownership	Change in Transporter of: Oil Dry	Other (Please explain) Change in Operator Gas effective: 4-1-79	
If change of ownership give name and address of previous owner			
. DESCRIPTION OF WELL AND	LEASE	Name of the last o	ind of Lease
Lease Name S. J. Sarkeys Location	5 0	Vanta abo s	tate, Federal or Fee fee
	PO Feet From The East	Line and 660 Feet From The	stouth
Line of Section 23 , To	wnship 2/S Range	37E , NMPM, 0	Les County
. DESIGNATION OF TRANSPOR		GAS Acctess (Give address to which approved	copy of this form is to be sent)
Name of Authorized Transporter of Cill Texas New Mexics (Dipeline Co.	Address (Give address to which approved BON 1510, Milland	2, Texas 79701
Name of Authorized Transporter of Cill Texas New Mexics (or Condensate Dipeline Co. Singheid Gas or Dry Gas Market Corp.	Address (Give address to which approved BOX 1510, Milland Address (Give address to which approved BOX 1589, Tulsa, (2, Texas 79701
Name of Authorized Transporter of Cill Texas New Mexics (cr Condensate Dipoline Co. singhed Gas or Dry Gas Unit Sec. Twp. Rge.	Address (Give address to which approved BOX 1510, Milland Address (Give address to which approved BOX 1589 Tulsa Is gas actually connected? When	Logo of this form is to be sent)
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VI. CERTIFICATE OF COMPLIANCE

Testing Method (pitot, back pr.)

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.

Tuping Pressure

Derry V. Roke
(Signature)
District Prod. & Drlg. Supt.
(Title)

3-13-79 (Date)

OIL CONSERVATION COMMISSION

Choke Size

Casing Pressure

APPROVED DISTRI

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 Sections I, II, III, and VI only 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.