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Ì	LAND OFFICE				
	TRANSPORTER	OIL			
		GAS			
	OPERATOR		L		
	PRORATION OFFICE		L		
1	Operator ARCO Oil			G	as

	DISTRIBUTION SANTA FE FILE J.S.G.S. AND OFFICE TRANSPORTER GAS OPERATOR PRORATION OFFICE	NEW MEXICO OIL CONSI REQUEST FOR AN AUTHORIZATION TO TRANSF	R ALLOWABLE	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65				
A. 1	Operator ARCO Oil & Gas C	ompany	•					
	Division of Atlantic Richfield Company Address P. O. Box 1710, Hobbs, New Mexico 88240 Other (Please explain)							
	Reason(s) for filing (Check proper box) New We!l Recompletion Change in Ownership	Change in Transporter of: Oil Dry Gas Casinghead Gas X Condensate	Effective 5-1-79					
I a	f change of ownership give name and address of previous owner							
n. 1	DESCRIPTION OF WELL AND L Lease Name Seven Rivers Queen Uni	Well No. 1 doi: 1. mary		Fee Fee Lease No.				
	Location							
	Unit Letter J; 1980 Feet From The SOULII Line and 1700 County							
	Line of Section 27 Town	aship 22S Range	36E NMPM, Lea					
III.	DESIGNATION OF TRANSPORT		cidress (Give address to which approved					
	Name of Authorized Transporter of the Co. P. O. Box 1510, Midland, Tex. 79701 P. O. Box 1510, Midland, Tex. 79701							
	Name of Authorized Transporter of Cast Petro Lewis Corp. Warren Petroleum Corp.	ingnedd Gds [K]	POO PEND 61489 Odessa, Okta. 797602 Is gas actually connected? When Is gas actually connected? When Is gas actually connected?					
	If well produces oil or liquids,	т 34 22 36	Yes W	L 5-1-79 PP 3-16-74 arren 3-25-60 663-R-4671				
IV.	If this production is commingled with COMPLETION DATA	h that from any other lease or pool, gi	New Well Workover Deepen	Plug Back Same Resty. Diff. Resty.				
	Designate Type of Completio	n – (X)		P.B.T.D.				
	Date Spudded	Date Compl. Ready to Prod.	Total Depth					
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top On/ Gds Fd/	Tubing Depth Depth Casing Shoe				
	Depth Casing Snoe							
		TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT						
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET					
				to a great to allow				
V	TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)							
	OII. WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift	, etc.)				
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size				
	Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF				
	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				
7	VI. 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 Orig. Signed -2 Jerry Sexton					
Di P. Sinchelland			TITLE Dist 1, Supv.					
			This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepen.					

a & Simbolian	
Di L. Snachefford	_
Engrg. Tech. Spec.	_
(Title)	

6-21-79

(Date)

If this is a request for allowable for a newly drilled or deepend 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 conditions. Separate Forms C-104 must be filed for each pool in multip completed wells.



JUN 2 2 1979
OIL CONSERVATION COMM.
HOBBS, N. M.