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J.S.G.S.				
LAND OFFICE				_
TRANSPORTER	OIL			_
I HANSFORTER	GAS		<u> </u>	_
OPERATOR			L	_
PRORATION OF	ICE	<u>L</u> _		_
Operator ADCO	0 i 1 s.	Ca	c (7

NEW MEXICO OIL CONSERVATION COMMISSIC. REQUEST FOR ALLOWABLE

Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65

KEGOEST LOW MEED WINDER	
AND	
AUTHORIZATION TO TRANSPORT OIL AND NATURAL	GAS

ILE		AND	
J.S.G.S.	AUTHORIZATION TO TRANS	SPORT OIL AND NATURAL GA	\$
LAND OFFICE			
TRANSPORTER OIL			
GAS			
OPERATOR			
Operator ARCO Oil & Gas Co	nmany		
Division of Atlar	ntic Richfield Company		
Address			
P. O. Box 1710, I	Hobbs, New Mexico 88240		
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well	Change in Transporter of:	Effective 5-1-79	,
Recompletion	Oil Dry Gas	HI	
Change in Ownership	Casinghead Gas X Condense	ite []	
If change of ownership give name			
and address of previous owner			
. DESCRIPTION OF WELL AND I	FASE		
Lease Name	Well No. Pool Name, Including For		Lease No.
Seven Rivers Queen Un	it 8 Eunice Seven R	ivers Qu So. State, Federal	Fee
Location			<u></u>
Unit Letter H : 16	50 Feet From The North Line	and 990 Feet From T	he <u>Last</u>
	200	36E , NMPM, Lea	County
Line of Section 27 Tov	vnship 22S Range	30E ,	
TOTAL AMION OF TRANSPOR	TER OF OIL AND NATURAL GAS		
Name of Authorized Transporter of Oil	X or Condensate	Address (Give address to which approv	ed copy of this form is to be sent)
Texas New Mexico Pipe		P. O. Box 1510, Midlan	d, Tex. 79701
Nation of Authorized Transporter of Cas	singhead Gas X or Dry Gas	Page Box 61489 Midlan	d _{n.} Tex. 7077208
Phillips Petroleum Co		P. O. Box 1510, Midian Address (Give address to which approv P. O. Box 61489, Midlan 4001 Penbrouks, Odessa, P. O. Box 1510, Tulsa, Whe	<u> dkia. /34982 — — — — — — — — — — — — — — — — — — —</u>
Warren Petroleum Corp If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected? Whe	L 5-1-79 PP 3-16-74 arren 3-25-60
give location of tanks.	$B \mid \mathcal{Z}7 \mid 22 \mid 36$		
If this production is commingled wi	th that from any other lease or pool, g	ive commingling order number: R-6	63-R-4671
V. COMPLETION DATA		New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v
Designate Type of Completi	Off Well		
	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Date Spudded	Date compilitional to the		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
			Depth Casing Shoe
Perforations			Depth Cashing Since
		CEMENTING DECORD	1
		CEMENTING RECORD DEPTH SET	SACKS CEMENT
HOLE SIZE	CASING & TUBING SIZE	DEI IN SET	
AND DEOUEST I	COP AT LOWARIE. (Test must be at	ter recovery of total volume of load oil	and must be equal to or exceed top allow
V. TEST DATA AND REQUEST I	able for this de	pth or be for full 24 nours/	
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas li	, e.c.,
		Casing Pressure	Choke Size
Length of Test	Tubing Pressure	Casind Lissema	
	au Dil	Water-Bbls.	Gas-MCF
Actual Prod. During Test	Oil-Bbls.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
		1	
0.00 W.T. T			
GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Methal Flod, 1881-Mol / B	-		Lobalia State
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
1			17:01:00:44:00:00:
VI. CERTIFICATE OF COMPLIA	NCE	OIL CONSERV	ATION, COMMISSION
VI. CERTIFICATE OF COMP		JUN 4	, 19
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.		APPROVEDOrig. Signed I	
		By Sexion	
above is true and complete to t		Dist 1, S	gri ba.
	garage and the second	TITLE	
	1000	11	compliance with RULE 1104.
N. L. M	hackelford	If this is a request for allowed this form must be accome	wable for a newly drilled or deepen panied by a tabulation of the deviati
	gnature)	II toles on the Well ID ALL	Didelico with ito
	Tech. Spec.	All sections of this form I	inst pe tilled out combining to: air.
	Title)	able 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.

(Date)

6-21-79

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JUN 2 2 1979
OIL CONSERVATION MANAGEMENT MAN