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DISTRIBUTION  SANTA FE  FILE	NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE		Form 2-124 Supersedes Old C-104 and Effective (-1-65
U.S.G.S.  LAND OFFICE  I RANSPORTER OIL  GAS  OPERATOR  PRORATION OFFICE	AUTHORIZATION TO	AND TRANSPORT OIL AND NATUR	
Atlantic Rich	field Company		
1	O, Hobbs, New Mexico 8824	10	
Reason(s) for filing (Check prop.  New Weil Headom; letton Change in Ownership	Change in Transporter of:		Included in Seven Rivers: 9-1-73. Change in least Oil WN #2.
If change of ownership give ne and address of previous owner	me		
Lease Name	ND LEASE	of Name, Including Formation	Kind of Lease
Seven Rivers Queen	Unit 33 Eu	nice Seven Rivers Queen	
Unit Letter K	1980 Feet From The South	Line and 1980 Feet F	rom The West
Line of Section 34	, Township 22S Range	36E , <sub>NMPM</sub> ,	Lea Con
DESIGNATION OF TRANSI	PORTER OF OIL AND NATURAL	C18	
Name of Authorized Transporter of Texas New Mexico Pip	of Cil XX or Condensate Deline Company	Address (Give address to which a P.O. Box 1510, Midla	pproved copy of this form is to be sent, and, Texas 79701
Name of Authorized Transporter of Casinghead GasXX or Dry Gas Phillips Petroleum Company		Address (Give address to which approved copy of this form is to be seatt).  Phillips Bldg. 4th & Washington, Odessa, Texas	
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Age. K 34 22S 36	Is gas actually connected?	When Unknown
If this production is commingle. COMPLETION DATA	d with that from any other lease or po	ool, give commingling order number:	
Designate Type of Comp	letion - (X)   Oil Well   Gas Wel	New Weil Workover Deepen	Plug Back   Same Resty, Diff. Re
Date Spudied	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Pool	Name of Producing Formation	Top Gil/Gas Pay	Tubing Depth
Perforations			Depth Casing Shoe
	TUBING, CASING, A	AND CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be	e after recovery of total volume of load depth or be for full 24 hours)	oil and must be equal to or exceed top al
Date First New Cil 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	Casing Pressure	Choke Size
CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
hereby certify that the rules as	nd regulations of the Oil Conservatio	APPROVED	, 19
commission have been complie above is true and complete to	d with and that the information give the best of my knowledge and belief	f.   BY	i 'vy

TITLE .

Administrative Supervisor

t 9, 1973 (Date)

(Title)

August

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.