NG. OF COPIES RECEIVES	4		
- DISTRIBUTION	-		Porm C-104 Supersodes Old C-104 and C-110
SANTA FE	REQUEST	FOR ALLOWABLE AND	Eliocuve 1-1-65
FILE		NSPORT OIL AND NATURAL GA	<
LAND OFFICE			5
	1		
TRANSPORTER GAS			
OPERATOR	4		
PRORATION OFFICE		•	
	Gas Company		
Division of Atla	ntic Richfield Company		
	Hobbs, New Mexico 88240		
Reason(s) for filing (Check proper bos	<i>(</i> )	Other (Please explain)	
New Well	Change in Transporter of:		
Recompletion	Oil Dry Ga	$\square$ Effortive $5-1-8$	34
Change in Ownership	Casinghead Gas y Conder		
change of ownership give name		¥	
nd address of previous owner			
DESCRIPTION OF WELL AND	LEASE	······	No.
Lease Name	Well No. Pool Name, Including F	ormation Kind of Lease State, Federal o	Lease No.
Seven Rivers Queen Unit	22 Eunice Seven	Rivers On South State, Federal C	Fee
Location			
Unit Letter D;	610 Feet From The North Lin	ne and <u>660</u> Feet From Th	•West
24	average 225 Range	36E , NMPM,	Lea County
Line of Section 34 T	ownship <u>22S</u> Range	3014	Lea
ACCOUNTION OF TRANSPOL	TER OF OIL AND NATURAL GA	<b>IS</b>	
Name of Authorized Transporter of O	il X or Condensate	Address (Give address to which approve	d copy of this form is to be sent)
Texas New Mexico Pipel	ine Co.	P.O. Box 2528, Hobbs, Ne	ew Mexico 88240
Name of Authorized Transporter of C	asinghead Gas 🗶 or Dry Gas 🦲	Address (Give address to which approve P.O. Box 1231, Midland,	d copy of this form is to be sent; Texas 79702
Getty Oil Co. <u>Phillips Petroleum Co.</u>	Warren Pet. Corp.	P.O. Box 1231, Midland, 4001 Penbrook, Odessa, 7 1s gas actually connected? When	<u>Fexas 79760</u> Box 1509,Tulsa,Ok.74102
If well produces oil or liquids,	Unit Sec. Twp. P.ge. I 34 22 36		rren 3/25/60, Phillips
give location of tanks.			6171 Cotty 5/01/94
f this production is commingled w	with that from any other lease or pool,	give commingling order number: $\frac{371}{R-66}$	63/R-4671
COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Res'v. Diff. Res'v.
Designate Type of Complet	ion - (X)		
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
			Depth Casing Shoe
Perforations			
	TURING CASING AN	ID CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be	after recovery of total volume of load oil as depth or be for full 24 houre)	nd must be equal to or exceed top allow
OIL WELL	Date of Test	Producing Method (Flow, pump, gas lift,	, etc.)
Date First New Oil Run To Tanks			
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Length of feet			
Actual Prod. During Test	Oil-Bble.	Water-Bbis.	Gas - MCF
GAS WELL			Gravity of Condensate
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
		Casing Pressure (Shut-is)	Choke Size
Testing Method (pitot, back pr.)	Tubing Pressure ( Shut-in )	Commy Freedow ( Commo )	
CERTIFICATE OF COMPLIA	INCE		TION COMMISSION
	a state of the Oil Concernation	APPROVED	
	nd regulations of the Oil Conservation d with and that the information give		. Seay
I hereby certify that the rules and regulations that the information given Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		Oil & Gas Inspector	
	.•	This form is to be filed in c	compliance with RULE 1104.
At. lin	K. V. Ins. D	The ship is a second for allow	able for a newly drilled or deepens
X ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	(gnature)	well, this form must be accompany tests taken on the well in accord	JING PA S (Spansion of the destand
Engrg. Tech. Spe	- / /		ance with HULL THE.
LINELES ICUIS DUE	(Tule)	able on new and recompleted we	-110.
6/08/84		Fill out only Sections I. II.	. III, and VI for changes of owne et, or other such change of condition
•	(Date)	Well name or number, or transport	be filed for each pool in multipl
		i completed wells.	

JUN 1 2 1984 HORRS OFFICE

.