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Appropriate District Office  
DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico  
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

Form C-104  
Revised 1-1-89  
See Instructions  
at Bottom of Page

RECEIVED

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

Operator Arch Petroleum Inc.		Well API No. 30-025-10400
Address 10 Desta Dr., Suite 420 East, Midland, Texas 79705		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> New Well <input type="checkbox"/> Change in Transporter of: <input checked="" type="checkbox"/> Recompletion <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> <input type="checkbox"/> Change in Operator <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>		
<input checked="" type="checkbox"/> Other (Please explain) Request for field re-designation to Wantz Abo		

If change of operator give name  
and address of previous operator

THIS WELL HAS BEEN PLACED IN THE POOL  
DESIGNATED BELOW. IF YOU DO NOT CONCUR

II. DESCRIPTION OF WELL AND LEASE

Lease Name E.M. Elliott Federal	Well No. 5	Pool Name, Including Formation Wantz Abo	Kind of Lease State, Federal or Fee	Lease No. LC-032573 (a)
Location Unit Letter <u>D</u> : <u>330</u> Feet From The <u>N</u> Line and <u>990</u> Feet From The <u>W</u> Line Section <u>22</u> Township <u>22S</u> Range <u>37E</u> , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Shell Pipeline	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1910, Midland, Texas 79701					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Texaco Producing Inc.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 3000, Tulsa, Ok. 74102					
If well produces oil or liquids, give location of tanks.	Unit D	Sec. 22	Twp. 22S	Rge. 37E	Is gas actually connected? Yes	When? This Completion 1-20-90

If this production is commingled with that from any other lease or pool, give commingling order number:

N/A

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well X	Gas Well	New Well	Workover	Deepen	Plug Back X	Same Res'v	Diff Res'v X
Date Spudded 4-18-48	Date Compl. Ready to Prod. 5-27-48		Total Depth 7325		P.B.T.D. 7025			
Elevations (DF, RKB, RT, GR, etc.) 3379 GR	Name of Producing Formation Abo		Top Oil/Gas Pay 6628		Tubing Depth 6526			
Perforations 6628-6892 (141 holes)					Depth Casing Shoe 7325			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17 1/2	13 3/8		225		230			
12 1/4	9 5/8		2753		1400			
8 3/4	7		6502		800			
6 1/4	5" Liner		6333-7325		125			

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL

(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.)

Date First New Oil Run To Tank 1-19-90	Date of Test 1-28-90	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hrs.	Tubing Pressure 200#	Casing Pressure 0	Choke Size 18/64
Actual Prod. During Test	Oil - Bbls. 8.28	Water - Bbls. 13.8	Gas - MCF 267

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation  
Division have been complied with and that the information given above  
is true and complete to the best of my knowledge and belief.

*David Miller*

Signature  
David Miller, Operations Manager  
Printed Name  
I-29-90 915-685-1961  
Date Telephone No.

OIL CONSERVATION DIVISION

FEB 08 1990

Date Approved

By ORIGINAL SIGNED BY JERRY SEXTON

Title DISTRICT I SUPERVISOR

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

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FEB 7 1990

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