NO. OF COPIES RECE			
DISTRIBUTIO			
FILE U.S.G.S. LAND OFFICE			
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			L
TRANSPORTER	OIL		
	GAS	<u> </u>	
OPERATOR			
PRORATION OFFICE			<u> </u>

	DISTRIBUTION ANTA FE	REQUEST FO	ISERVATION COMMISSION OR ALLOWABLE AND	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65		
1	J.S.G.S. AND OFFICE I RANSPORTER GAS GAS	AUTHORIZATION TO TRANS	SPORT OIL AND NATURAL GAS	5		
	PRORATION OFFICE					
0	ARCO Oil and Gas Company, Division of Atlantic Richfield Company					
	Address P. O. Box 1710, Hol	obs, New Mexico 88240	Other (Please explain)			
- 1	Reason(s) for filing (Check proper box) New We!!	Change in Transporter of:	Other (Please explain)			
	Recompletion Change in Ownership	Oil Dry Gas Casinghead Gas Condense	Effective 4-22-80			
II a	f change of ownership give name nd address of previous owner					
	DESCRIPTION OF WELL AND LI	EASE Dual w/Langley El	lenburger Gas	Lease No.		
	Lease Name Langley Deep	1 Langley Devonia		r FeeFederal LC-030133		
-	Location C 990	Feet From The North Line	and Feet From Th	eWest		
	Unit Letter	225 36	BE , NMPM, Lea	County		
	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GAS	S Address (Give address to which approve	d copy of this form is to be sent)		
111. [Name of Authorized Transporter of Oil	0, 00,000	P O Box 2528, Hobbs, Nev	w Mexico 88240		
	Texas New Mexico Pipeli Name of Authorized Transporter of Casi El Paso Natural Gas Co.	nghead Gas or Dry Gas 🔼	Address (Give address to which approve P.O.Box 1384, Jal, New P.O.Box 1589, Tulsa, Ok	d conv of this form is to be sent/		
	Warren Petroleum Co.	Unit Sec. Twp. P.ge.	Is gas actually connected?	EPNG CO. 2-21-00		
	If well produces oil or liquids, give location of tanks.	C 28 22 36	Yes	WAR 3-26-80		
IV.	If this production is commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA Oil Well Gas Well New Well Workover Deepen Plug Back Same Res'v. Diff. Res'v.					
	Designate Type of Completion	n – (X)	Total Depth	P.B.T.D.		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	The state of the s		
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth		
	Perforations			Depth Casing Shoe		
			CEMENTING RECORD	SACKS CEMENT		
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	3,0110 0211121		
v	. TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a able for this de	enth or be for full 24 nours)	and must be equal to or exceed top allow		
OIL 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	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate		
	Actual Prod. Test-MCF/D	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size		
	Testing Method (pitot, back pr.)	Tubing Pressure (Shit-111)		ATION COMMISSION		
VI. CERTIFICATE OF COMPLIANCE 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.		APE.	OIL CONSERVATION COMMISSION			
		Orig. Signed by Jerry Sexton				
		If Digt L. SUDV				
			TITLE This form is to be filed in	compliance with RULE 1104.		
	D. L. Shacket	Gard	If this is a request for all	wable for a newly drilled of despen-		
	- 141 x. x. 1000	gnature)		ordance with RULE 111.		

(Sanature) Engrg. Tech. Spec.

(Date)

4-22-80

(Title)

All sections of this form must be filled out completely for allow 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.