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U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OFFICE			

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

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

FILE		AND			
U.S.G.S.	AUTHORIZATION TO TRAIL	NSPORT OIL AND NATURAL (GAS		
LAND OFFICE		•			
OIL	7				
TRANSPORTER GAS					
OPERATOR	_				
PRORATION OFFICE					
Operator ARCO Oil & Gas	Company				
	ic Richfield Company				
Address					
P. O. Box 1710, Ho	bbs, New Mexico 88240	Other (Please explain)			
Reason(s) for filing (Check proper bo		Office (1 tease explain)			
New Well	Change in Transporter of:				
Recompletion	Oil Dry Gas	°			
Change in Ownership	Casinghead Gas Condens	sate			
If change of ownership give name					
and address of previous owner					
	Dual w/ Langley	Dev. Gas			
DESCRIPTION OF WELL AND	Well No. Pool Name, Including Fo	ormation 0 / 17/ Kind of Leas	Lease No.		
Lease Name	1 ondebignated	State, recer	alor Fee Fee		
Langley Griffin	l Langley Ellenb	urger			
Location		1000	Foot		
	980Feet From TheLine	e andFeet From	The East		
Unit Letter;			_		
Line of Section 28	ownship 22S Range	36E , NMPM,	Lea County		
Line of Section		,			
PERCENTATION OF TRANSPOL	RTER OF OIL AND NATURAL GA	.S			
Name of Authorized Transporter of C	or Condensate X	Address (Give address to which appro	oved copy of this form is to be sent)		
The Permian Corp		P. O. Box 1183, Housto	n. Texas		
		Address (Give address to which appro	oved copy of this form is to be sent)		
Name of Authorized Transporter of C		!			
El Paso Natural Ga		P. O. Box 1384, Ja1, N	hen		
If well produces oil or liquids,	Unit Sec. Twp. Rge.	10 945 4514-117			
give location of tanks.	J 28 22S 36E	Yes	7/2/80		
	with that from any other lease or pool,	give commingling order number:			
If this production is commingled to	with that from any other lease of poor,				
COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.		
Designate Type of Complete	tion - (X) x	x	· i · · · · · · · · · · · · · · · · · ·		
	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
Date Spudded	•	15,656'	15,539'		
12-31-79	7-29-80		Tubing Depth		
Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Formation	Top Oil/Gas Pay	i		
3488.4' GR	Ellenburger Gas	15,322'	15,223' Depth Casing Shoe		
Perforations			· -		
15,322-15,515'			15,656'		
	TUBING, CASING, AND	D CEMENTING RECORD			
	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
HOLE SIZE	13-3/8" OD	1405'	1050		
17½"		6224'	4200		
12-3/4"	9-5/8" OD		3275		
8-3/4"	7" OD	15,638			
	2-3/8" OD	15,223'			
V. TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be a	after recovery of total volume of load or	il and must be equal to or exceed top allow		
OIL WELL	able for this de	epth or be for full 24 hours)			
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	lift, etc.)		
24.0					
	Tubing Pressure	Casing Pressure	Choke Size		
Length of Test					
		Water-Bbls.	Gas-MCF		
Actual Prod. During Test	Oil-Bbls.				
1					
GAS WELL					
Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate		
5,407	8 hrs	3	65.3°		
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size		
	1990#	pkr	Various		
4-pt			ATION COMMISSION		
I. CERTIFICATE OF COMPLIA	ANCE		1010		
•		APPROVED AUG	0 19		
I hereby certify that the rules a	the subsection and regulations of the Oil Conservation / /		1.1		
above is true and complete to	the best of my knowledge and belief.	SUPERVISE	R DISTRICT i		
		TITLE VIOLE	ノエモ エンスレンエエ はしてお 型		
		11/	n compliance with Bull F 1104.		
	• (/	This form is to be filed in compliance with RULE 1104.			
TITO MISTOR	met	If this is a request for allowable for a newly drilled or deepene well, this form must be accompanied by a tabulation of the deviation			
15	Signature)	tests taken on the well in acc	cordance with MULE !!!		
Dist. Drlg. Supt.		All sections of this form	must be filled out completely for allow		
(Title) able on new and recompleted wells.			Wells.		
		11 -	The ser is a ser for observed of owner		

(Date)

8/4/80

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.

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.