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| TRANSPORTER | OIL |
| | GAS |
| OPERATOR | |
| PRORATION OFFICE | |

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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

| | | | |
|-----------------------------------------|-------------------------------------|----------------------------------------|--------------------------|
| Operator | | ARCO Oil and Gas Company | |
| Address | | Division of Atlantic Richfield Company | |
| | | Box 1710, Hobbs, New Mexico 88240 | |
| Reason(s) for filing (Check proper box) | | Other (Please explain) | |
| New Well: | <input checked="" type="checkbox"/> | Change in Transporter of: | |
| Recompletion: | <input type="checkbox"/> | Oil | <input type="checkbox"/> |
| Change in Ownership: | <input type="checkbox"/> | Casinghead Gas | <input type="checkbox"/> |
| | | Dry Gas | <input type="checkbox"/> |
| | | Condensate | <input type="checkbox"/> |

If change of ownership give name
and address of previous owner

| | | | |
|-------------------------------|----------|--------------------------------|----------------------------------------|
| DESCRIPTION OF WELL AND LEASE | | Lease No. | |
| Lease Name | Well No. | Pool Name, including Formation | Kind of Lease |
| McDonlad WN State | 29 | Jalmat Yates 7R Gas | State, Federal or Fee State |
| Location | | Lease No. A-2614 | |
| Unit Letter | B | 990 Feet From The | North Line and 1980 Feet From The East |
| Line of Section | 25 | Township | 22S Range 36E, NMPM, Lea County |

| | | | |
|-------------------------------------------------------------|--------------------------|--------------------------------------------------------------------------|-------------------------------------|
| DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS | | Address (Give address to which approved copy of this form is to be sent) | |
| Name of Authorized Transporter of Oil | <input type="checkbox"/> | or Condensate | <input type="checkbox"/> |
| Name of Authorized Transporter of Casinghead Gas | <input type="checkbox"/> | or Dry Gas | <input checked="" type="checkbox"/> |
| El Paso Natural Gas Company | | Box 1384, Jal, New Mexico 88252 | |
| If well produces oil or liquids, give location of tanks. | Unit | Sec. | Twp. |
| | | | Pge. |
| | | | Is gas actually connected? When |
| | | | No SI, WOPLC |

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 - (X) | | | | X | | X | | | | | | | | | | | |
| Date Spudded | Date Compl. Ready to Prod. | | Total Depth | | P.B.T.D. | | | | | | | | | | | | |
| 7/15/82 | 8/15/82 | | 3513' | | 3467' | | | | | | | | | | | | |
| Elevations (DF, RKB, RT, GR, etc.) | Name of Producing Formation | | Top Oil/Gas Pay | | Tubing Depth | | | | | | | | | | | | |
| 3444.7' GR | Yates 7R Gas | | 2994' | | 3411' | | | | | | | | | | | | |
| Perforations | 2994, 97, 3024, 27, 3126, 28' | | Depth Casing Shoe | | 3509' | | | | | | | | | | | | |
| 3226, 29, 37, 39, 70, 72, 3355, 59, 3417, 21' | | | | | | | | | | | | | | | | | |
| TUBING, CASING, AND CEMENTING RECORD | | | | | | | | | | | | | | | | | |
| HOLE SIZE | | CASING & TUBING SIZE | | DEPTH SET | | SACKS CEMENT | | | | | | | | | | | |
| 17 1/2" | | 14" cond pipe | | 30' | | 2 1/2 yds Redi-mix | | | | | | | | | | | |
| 12 1/4" | | 8-5/8" OD | | 451' | | 250 sx, Circ | | | | | | | | | | | |
| 7-7/8" | | 4 1/2" OD | | 3509' | | 950 sx, Circ | | | | | | | | | | | |
| | | 2-3/8" OD | | 3411' | | | | | | | | | | | | | |

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 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 | | Ebls. Condensate/MMCF | | Gravity of Condensate | |
| Actual Prod. Test-MCF/D | Length of Test | | | | |
| 57 | 24 hrs | | | | |
| Testing Method (pilot, back pr.) | Tubing Pressure (Shut-in) | Casing Pressure (Shut-in) | Choke Size | | |
| back pr. | 45# | 45# | 64/64" | | |

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.

Elizabeth L. Bush
(Signature)
Drlg. Engr.
(Title)
10/14/82
(Date)

OIL CONSERVATION COMMISSION

APPROVED DEC 16 1983, 19_____
BY ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR
TITLE _____

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 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 multiple.