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U.S.G.S.		
LAND OFFICE		
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

I. Operator: ARCO Oil and Gas Company
Division of Atlantic Richfield Company
Address: P. O. Box 1710, Hobbs, New Mexico 88240
Reason(s) for filing (Check proper box):
New Well: ☒ Change in Transporter of:
Recompletion: ☐ Oil ☐ Dry Gas ☐
Change in Ownership: ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain):

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Seven Rivers Queen Unit	59	Eunice 7R Qn South	State, Federal or Fee Fee	
Location: Unit Letter H : 2575 Feet From The North Line and 1275 Feet From The East Line of Section 27 Township 22S Range 36E , 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"/>	Address (Give address to which approved copy of this form is to be sent)			
Texas New Mexico Pipeline Company	Box 2528, Hobbs, New Mexico 88240			
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)			
Phillips Petroleum Company	4001 Penbrook, Odessa, TX 79760			
Petro Lewis Corp.	Box 16200, Lubbock, TX 79490			
Warren Petroleum Co.	Box 15899, Tulsa, OK 74102			
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.
	I	34	22S	36E
Is gas actually connected?		When		
Yes		3/15/82		

If this production is commingled with that from any other lease or pool, give commingling order number: R-663, R-4671

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
X	X		X					
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
2/2/83	3/15/ 83		3929'		3881'			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
3502.9' GR	Seven Rivers Qn So.		3807'		3868'			
Perforations	3807, 10, 14, 20, 23, 28, 35, 38, 3842, 3771, 76, 81, 83, 85, 89, 3711, 14, 17, 20, 33, 35'				Depth Casing Shoe			
				3925'				
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17 1/2"	14" cond pipe		30'		2 yds Redi-mix			
11"	8-5/8" OD		320'		185 sx			
7-7/8"	5 1/2" OD		3925'		1050 sx			
	2-3/8" OD		3868'					

V. TEST DATA AND REQUEST FOR ALLOWABLE (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.)	
2/24/83	3/22/83	Pump	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs	-	-	-
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
118 bbls	19	99	33

GAS WELL

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

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 S. Bush
(Signature)

Drlg. Engr.

(Title)

3/24/83

(Date)

OIL CONSERVATION COMMISSION

MAR 4 1983

APPROVED _____, 19 _____

BY ORIGINAL SIGNED BY TERRY SEXTON
DISTRICT I SUPERVISOR

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 multiply completed wells.

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