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TRANSPORTER	OIL	
	GAS	
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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 Division of Atlantic Richfield Company	
Address P. O. 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"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Seven Rivers Queen Unit	Well No. 61	Pool Name, including Formation Eunice 7R On South	Kind of Lease State, Federal or Fee	Lease No. Fee
Location Unit Letter <u>F</u> ; <u>2440</u> Feet From The <u>North</u> Line and <u>2435</u> Feet From The <u>West</u> Line of Section <u>34</u> Township <u>22S</u> Range <u>36E</u> , NMPM, <u>Lea</u> 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) Box 2528, Hobbs, New Mexico 88240	
Texas New Mexico Pipeline Company	Address (Give address to which approved copy of this form is to be sent) 4001 Penbrook, Odessa, TX 79760	
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) Box 16200, Lubbock, TX 79410	
Phillips Petroleum Co. Petro Lewis Corp Warren Petroleum Co	Box 1580, Tulsa, Okla 74102	
If well produces oil or liquids, give location of tanks.	Unit I	Sec. 34
	Twp. 22S	Rge. 36E
	Yes 4/12/83	

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 <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'tv. <input type="checkbox"/>	Diff. Res'tv. <input type="checkbox"/>
Date Spudded 2/17/83	Date Compl. Ready to Prod. 4/9/83		Total Depth 3925'		P.B.T.D. 3841'			
Elevations (DF, RKB, RT, GR, etc.) 3496.7' GR	Name of Producing Formation Seven Rivers On So.		Top Oil/Gas Pay 3676'		Tubing Depth 3723'			
Perforations 3676, 79, 82, 85, 3700, 16, 19, 21, 23					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 24# K-55		304'		200 sx			
7-7/8"	5 1/2" OD 15.5# K-55		3925'		950 sx			
	2-3/8" OD		3723'					

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 3/21/83	Date of Test 5/4/83	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hrs	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test 249 bbls	Oil - Bbls. 50	Water - Bbls. 199	Gas - MCF 40

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. 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.


(Signature)
Drlg. Engr.
(Title)
5/10/83
(Date)

OIL CONSERVATION COMMISSION

MAY 13 1983

APPROVED _____, 19 _____

BY ORIGINAL SIGNED BY MARY 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 multiply completed wells.

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