ſ	NO. OF COPIES RECI	LIVED	
	DISTRIBUTION		
ı	SANTA FE		
	FILE		
ı	U.S.G.S.		
	LAND OFFICE		
	TRANSPORTER	OIL	
		GAS	
	OPERATOR		
ı.	PRORATION OFFICE		

NO. OF COPIES RECEIVED			
DISTRIBUTION	NEW MEXICO OIL CO	NSERVATION COMMISSION	Form C-104
SANTA FE	REQUEST F	OR ALLOWABLE	Supersedes Old C-104 and C-11
FILE	1,1240207	AND	Effective 1-1-65
U.S.G.S.	AUTUODIZATION TO TOAN	NSPORT OIL AND NATURAL G	24
	AUTHORIZATION TO TRAF	ASPORT OIL AND NATURAL G	,A3
LAND OFFICE			
TRANSPORTER OIL			
GAS			
OPERATOR			
PRORATION OFFICE			
Operator ARCO Oil and Ga	s Company		
	antic Richfield Co.		
Address	direze kizerizatea		
	11 - NM 002/0		
P.O. Box 1710, H	ODDS, NM 88240	Other (Please explain)	
Reason(s) for filing (Check proper box))	1 '	500 111 11 -1111-
New Well	Change in Transporter of:		500 bbl oil allowable
Recompletion	Oil Dry Gas		n of March 1984 and a
Change in Ownership	Casinghead Gas Condens	sate 🔲 1000 bbl oil all	lowable during the month
Change in Constraint			n order to test & comple
If change of ownership give name		01 IIF111 170 -	•
and address of previous owner			
•			
. DESCRIPTION OF WELL AND	LEASE		
Lease Name	Well No. Pool Name, Including Fo		
Ollie J. Boyd	6 Wantz Abo_	State, Federa	l cr Fee Fee
Location			
	00 Nam+1	, 660	The East
Unit Letter H : 18	80 Feet From The Northne	e and OOO Feet From	
Line of Section 23 Tox	wnship 22S Range	37E , NMPM,	Lea County
. DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GAS	s	
Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which appro-	ved copy of this form is to be sent)
ī		P.O. Box 159, Artes	ia. NM 88210
Navajo Crude Oil	Purchasing Co.	Address (Give address to which appro-	ved copy of this form is to be sent)
Name of Authorized Transporter of Car	singnedd Gds or Dry Gds	1	
None		La Land	
If well produces oil or liquids,	Unit Sec. Twp. Rge.		^{en} To be connected when
give location of tanks.	H 23 22S 37E	No t	esting completed
		nive commingling order number:	
	th that from any other lease or pool,	give comminging order number.	
V. COMPLETION DATA	Oil Well Gas Well	New Well Workover Deeper.	Plug Back Same Res'v. Diff. Res'v
Designate Type of Completic) I I	
Designate Type of complete			P.B.T.D.
Date Spudded	Date Compl. Ready to Prod.	Total Depth	
i			
			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth Depth Casing Shoe
Elevations (DF, RKB, RT, GR, etc.) Perforations	Name of Producing Formation	Top Oil/Gas Pay	
		Top Oil/Gas Pay	Depth Casing Shoe
Perforations			
	TUBING, CASING, AND	CEMENTING RECORD	Depth Casing Shoe
Perforations	TUBING, CASING, AND	CEMENTING RECORD	Depth Casing Shoe
Perforations	TUBING, CASING, AND	CEMENTING RECORD	Depth Casing Shoe
Perforations	TUBING, CASING, AND	CEMENTING RECORD	Depth Casing Shoe
Perforations HOLE SIZE	TUBING, CASING, AND CASING & TUBING SIZE	DEPTH SET	Depth Casing Shoe SACKS CEMENT
Perforations HOLE SIZE	TUBING, CASING, AND CASING & TUBING SIZE COP ALLOWARLE (Test must be a	DEPTH SET DEPTH SET fter recovery of total volume of load oil	Depth Casing Shoe SACKS CEMENT
Perforations HOLE SIZE V. TEST DATA AND REQUEST F	TUBING, CASING, AND CASING & TUBING SIZE COP ALLOWARLE (Test must be a	DEPTH SET DEPTH SET fter recovery of total volume of load oil pth or be for full 24 hours)	Depth Casing Shoe SACKS CEMENT and must be equal to or exceed top allow
Perforations HOLE SIZE	TUBING, CASING, AND CASING & TUBING SIZE COP ALLOWARLE (Test must be a	DEPTH SET DEPTH SET fter recovery of total volume of load oil	Depth Casing Shoe SACKS CEMENT and must be equal to or exceed top allow
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HOLE SIZE HOLE SIZE V. TEST DATA AND REQUEST FOIL WELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test	TUBING, CASING, AND CASING & TUBING SIZE OR ALLOWABLE (Test must be a able for this de Date of Test Tubing Pressure	DEPTH SET DEPTH SET fter recovery of total volume of load oil of the pth or be for full 24 hours) Producing Method (Flow, pump, gas left) Casing Pressure Water-Bbls.	Depth Casing Shoe SACKS CEMENT and must be equal to or exceed top allowift, etc.) Choke Size Gas-MCF
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ati & Sharkalland
Energ. Tech. Spec
Engrg. Tech. Spec. (Title)
3/22/84
(Date)

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. H. 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

