F	DISTRIBUTION SANTA FE FILE		ONSERVATION COMMISSION FOR ALLOWABLE	Porm C-104 Supersedes Old C-104 and C-3 Effective 1-1-85
	U.S.G.S	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL GA	NS
1.	PRORATION OFFICE OPercia ARCO 011 and Gas	Company		
	Division of Atlantic	1 5	•	
	Address P. O. Box 1710, Hobbs, New Mexico 88240			
ł	Reason(s) for filing (Check proper box) Other (Please explain)			
	New Well X Recompletion Change in Ownership	Oil Dry Gar Casinghead Gas Conden		
	If change of ownership give name and address of previous owner			
U .	DESCRIPTION OF WELL AND I	LEASE		
	Lease Name Seven Rivers Queen Unit	Well No. Pool Name, Including Fo 63 Eunice Seven R	State Forders 1	or Fee Fee
	Unit LetterL ;13	30 Feet From The South Line		west
[Line of Section 34 Tow	mship 225 Range 3	6Е, ммрм,	Lea County
m .	DESIGNATION OF TRANSPORT Name of Authorized Transporter of Oil	ER OF OIL AND NATURAL GA Image: Condensate	Address (Give address to which approve	
	Texas New Mexico Pipelin Name of Authorized Transporter of Cas Getty Oil Company	e Co. inghead Gas 🖄 or Dry Gas 🗍	P. O. Box 2528, Hobbs, N Address (Give address to which approve Box 1231, Midland Texas	ew Mexico 88240 ed copy of this form is to be sent) 79702
	Philips Petr Company		Address (Give address to which approve Box 1231, Midland, Texas 4001 Penbrook, Odessa, T Box 1201, Villea, Oklassa, T Box 1201, Connected, When	exas 79760
	Warren Petroleum Company If well produces oil or liquids, give location of tanks.	I 34 22 36	Yes	8/29/84
	If this production is commingled wit	h that from any other lease or pool,	give commingling order number: <u>R</u>	-663/R-4671
IV.	COMPLETION DATA Designate Type of Completio	n = (X) Oil Well Gas Well X	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.
	Date Spudded 7/9/84	Date Compl. Ready to Prod. 8/28/84	Total Depth 3811'	P.B.T.D. 3875'
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oll/Gas Pay	Tubing Depth
	3499.2' GR Perforations 3685, 96, 370 47 52 60 6	Seven Rivers Queen 3, 06, 09, 15, 19, 21, 20 5, 72, 3775'.	j 3685' 6, 37, 44,	3625' Depth Casing Shoe 3811'
	47, 52, 00, 0	TUBING, CASING, AND	D CEMENTING RECORD	
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT 2 ¹ / ₂ yds Redi-mix
	1/2" 12½"	8-5/8" OD	319'	200 sx
	7-7/8"	$5\frac{1}{2}$ " OD	<u>3911'</u> 3625'	800 sx
v	TEST DATA AND REQUEST F	DR ALLOWABLE (Test must be a	ifter recovery of sotal volume of load oil a	nd must be equal to or exceed top allow
••	OIL WELL Date First New Oil Run To Tanks	able for this de	epth or be for full 24 hours) Producing Method (Flow, pump, gas lift	
	7/25/84	9/25/84	Pump	
	Length of Test	Tubing Pressure	Casing Pressure 67#	Choke Size
	24 hrs Actual Prod. During Test	67# Oil-Bbie.	Water - Bbls.	Gas - MCF
	228 bbls	47	181	71
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Candenaate
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
VI.	I. CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation		OIL CONSERVATION COMMISSION	
	I hereby certify that the rules and a Commission have been complied a above is true and complete to the	with and that the information given	AN ADICINAL SIGN	IED BY REAL MALLON
	above is true and complete to the		ii Distanci	t i supervisior
	Elisbuth S. B.	k	TITLE This form is to be filed in c	
	(Signature)		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.	
	Drlg. Engr. (Tule)			it be filled out completely for allow
	9/26/84		Fill out Only Sections I. II.	III. and VI for changes of owner
	(D)			er, or other such change of condition be filed for each pool in multiply