

Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

I. Operator **ARCO OIL AND GAS COMPANY** Well API No. **30-025-30742**
Address **Box 1610, Midland, Texas 79702**
Reason(s) for Filing (Check proper box) ☒ New Well ☐ Other (Please explain)
☐ Recompletion ☐ Change in Transporter of:
☐ Change in Operator ☐ Oil ☐ Dry Gas ☐
☐ Casinghead Gas ☐ Condensate ☐
If change of operator give name and address of previous operator _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Seven River Queen Unit	Well No. 76	Pool Name, including Formation Eunice 7RQ, South	Kind of Lease State, Federal or <input checked="" type="radio"/> Fee	Lease No.
Location Unit Letter G : 2575 Feet From The North Line and 1590 Feet From The East Line Section 34 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"/> Texas-New Mexico Pipe Line Co.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 2528, Hobbs NM 88240	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> * Texaco Producing, Co./Warren Petroleum	Address (Give address to which approved copy of this form is to be sent) Box 728, Hobbs, NM 88240/Box 1589	
If well produces oil or liquids, give location of tanks.	Unit I	Sec. 34
	Twp. 22S	Rge. 36E
	Is gas actually connected? yes When? 1-20-90	

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

IV. COMPLETION DATA *3rd Gas Transporter: **Phillips 66 Nat'l Gas, 4001 Penbrook, Odessa, TX 79760**

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 12-27-89	Date Compl. Ready to Prod. 1-20-89	Total Depth 3850		P.B.T.D. 3810				
Elevations (DF, RKB, RT, GR, etc.) 3510 GR 3520 KB	Name of Producing Formation Queen	Top Oil/Gas Pay 3682		Tubing Depth 3613				
Perforations 3682-3760						Depth Casing Shoe 3842		
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4	8 5/8		326		175			
7 7/8	5 1/2		3842		850			
	2 3/8		3613					

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 Tank 1-20-90	Date of Test 1-22-90	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hrs	Tubing Pressure 30	Casing Pressure 30	Choke Size —
Actual Prod. During Test	Oil - Bbls. 93	Water - Bbls. 276	Gas- MCF 24

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. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Ken W. Gosnell
Signature
Ken W. Gosnell Engr. Tech.
Printed Name
1-24-90 Title
Date
915/688-5672 Telephone No.

OIL CONSERVATION DIVISION

Date Approved **JAN 30 1990**
ORIGINAL SIGNED BY JERRY SEXTON
By **DISTRICT I SUPERVISOR**
Title _____

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

RECEIVED

JAN 29 1990

OCD
HOBBS OFFICE