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

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

State of New Mexico Energy, Minerals and Natural Resources Department

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

Wall ADING

## OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Arch Petro	leum I	m.				,,,cii X			
Arch Petro.  Address 777 Taylor  Resson(s) for Filing (Check proper ba	St., Su	ite I	I-A, F	ort W	orth,	7x 7	6102		
(Cason(a) for 1 mmg (Cason proper so	~,			Other	(Please explai	n)			
New Well		hange in Tra	· 🖂	•					
Recompletion $\bigsqcup$	Oil		Gas 📙			•			
Change in Operator   f change of operator give name  and address of previous operator	Casinghead	Gas Co	Perodu A	tion Pa	Ray /	036 1	= 1110 = -	L Tu	76101
			Troquet	TUN CO.	, BOX 1	<u> </u>	T. WUFT	0,_(X.	,
II. DESCRIPTION OF WELL AND LEASE  Lease Name Well No.   Pool Name, Including					g Formation Kind of Lease				ase No.
	E.C. Hill "B" Federal 2 Teague.				·V	State,(1	Federa or Fee	71-06	4118
Location Unit Letter			et From The		•	10 F	et From The	E	Line
2	nship	10.	nge 3	7	лем,			Lea	County
m. designation of tr	ANSPORTER	OF OIL	AND NATU	RAL GAS					
Name of Authorized Traditioner Br. C		or Condensate		Address (Give	address to wh	ich approved	copy of this for	m is to be set	u)
Texaso Trading +	Transpor	lation	#/E.				over, C		
Name of Authorized Transporter of C	asinghead Gas		Dry Gas				copy of this for		n)
El Paso Natural		Can Im	m   Pac		connected?	When	150, TX	17718	· · · · · · · · · · · · · · · · · · ·
If well produces oil or liquids, give location of tanks.	141	34 i	<u> </u>	Is gas actually connected? When?  VES   5/74					
If this production is commingled with IV. COMPLETION DATA	that from any othe	r lease or poo	d, give commingl						
Designate Type of Comple	tion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded	Date Compl	l. Ready to Pr	od.	Total Depth	•	·	P.B.T.D.		<u> </u>
Elevations (DF, RKB, RT, GR, etc.)	(DF, RKB, RI, GR, etc.) Name of Producing Formation			Top Oil/Gas Pay			Tubing Depth		
Perforations			Depth Casing Shoe						
				·			1		
			ASING AND	CEMENTI		ע	_	1000 051	CUT
HOLE SIZE	CAS	SING & TUB	NG SIZE	ļ	DEPTH SET		<u>s</u>	ACKS CEM	ENI
			·····	<del> </del>					
							<u> </u>		
V. TEST DATA AND REQ	UEST FOR A	LLOWAI	BLE					4 11 94 1	
	ofter recovery of to		load oil and mus	be equal to or	exceed top all the ethod (Flow, pr	owable for th	is depth or be for	or full 24 hou	US.)
Date First New Oil Run To Tank	Date of Tes	<b>s</b> t		rioducing M	eulou (r <i>io</i> w, pi	nuh' see ihi'	e.c.,		
Length of Test	ogth of Test Tubing Pressure			Casing Pressure			Choke Size		
Total or your	tuoning reasons						Con MCE		
Actual Prod. During Test	Oil - Bbls.	Oil - Bbls.			Water - Bbis.			Gas- MCF	
GAS WELL	l								
Actual Prod. Test - MCF/D	Length of	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. OPERATOR CERT						<b>USERV</b>	ATION	DIVISIO	NC
I hereby certify that the rules and regulations of the Oil Conservation  Division have been complied with and that the information given above					OIL CONSERVATION DIVISION				
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.				Date Approved APR 2 6 1989					
$\sim$	χ.,		/		- , hprove				
- ( fanot Dy den				By_	0	RIGINAL S	IGNED BY		XTON
Signature Janet Dryden Agent				-		DIST	MCT I SUP	RVISOR	
Printed Name 2 / 2 G				Title	9				
2-1-89		81 1/332	4-409 hone No						. —
Date		Tereb	NUC ITO.		والمراز المستوي المراز				

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.

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APR 14 1989

OCO HOBBS OFFICE

			COPY TO O. C. C.				
		· · · · · · · · · · · · · · · · · · ·	GUDMIT IN TRIPLICATE	Form approved. Budget Bureau No. 42-R1424.			
Form 9-331 (May 1963)	55545	UNITE' TATES	Other instructions on re	o, LEASE DESIGNATION A	ND SERIAL NO.		
OTHER OF THE INTERIOR (Other instructions on respectively)  DEPARTMENT OF THE INTERIOR (Other instructions on respectively)  GEOLOGICAL SURVEY				Las Cruces 064118 6. IF INDIAN, ALLOTTEE OR TRIBE NAME			
(Do not use	this form for pro	OTICES AND REPORTS  oposals to drill or to deepen or plus of the permit—" for such	S ON WELLS  ig back to a different reservoir.  th proposals.)	6. IF INDIAN, ACTOTION	OK 12152		
	Use ATT			7. UNIT AGREEMENT NAM	1E		
1. θτε <b>Γ</b> 6Δ		D					
2. NAME OF OPERAT				S. FARM OR LEASE NAME			
Code E	Coundation	Production Company		E.C. Hill "B" Federal			
3. ADDRESS OF OPE	RATOR	1,000		9. WELL NO.			
~ ^ 6	000 Fe	smit, Texas 79745		10. FIELD AND POOL, OR WILDCAT			
A LOCATION OF WE	OX JUU, NE	on clearly and in accordance with	any State requirements.*				
See also space 17 below.) At surface 1981' FNL & 810' FEL of Section 34,			Section 34,	Teague (Blinebry)			
T-23-S, R-37-E, Lea County, New Mexico				11. SEC., T., R., M., OR B. SURVEY OR AREA	LK. AND		
	1-23	-5, K-5/-L, Let Co-		Sec. 34, T-23			
		15. ELEVATIONS (Show wheth	er DF, RT, GR, etc.)	12. COUNTY OR PARISH			
14. PERMIT NO.		3275' KB, 3261		Lea	New Mexico		
16.			te Nature of Notice, Report, or (	Other Data	<b>.</b>		
	WELL OFF	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING V	<del></del>		
TEST WATER S		MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING C.	i —		
SHOOT OR ACI		ABANDON*	SHOOTING OR ACIDIZING	ABANDONME	NT*		
REPAIR WELL		CHANGE PLANS	(Other) Report result	ts of multiple completion	on Well		
			Completion or Recom	Dieffell Report and Dog to	1111./		
17. DESCRIBE PROP proposed we nent to this	JIK. II WEIL IN G	••••	tinent details, and give pertinent date locations and measured and true verti	s, including estimated dal cal depths for all marker	s and zones perti-		
9-	-29-79	Waited 4 hrs. Pum	ped in 48 sacks.				
_	-30-79	walted on coment 2	4 hrs.				
<b>8-</b>		Dellad through CAR	ent retainer and plug.	Lost circulation	n.		
<b>y-</b>	- 1-79	Dan coment retaine	to 2944'. Cemented w	rith 100 sacks,	did		
<b>9</b> -	- 4-79	not hold. Waited	hrs., resqueezed with	100 sacks.			
		Squeeze held.					
9-	- 6-79	Drilling out cement	retainer.				

1.1 = 0 = 1 V E D SLP 1.1 1979

U. S. GEOLOGICAL SURVEY HOBBS, NEW MEXICO

18. I hereby certify that the foregoing is true and correct SIGNED	TITLE	Agent	DATE 9-7-79
(This space for Federal or State office use)  APPROVED BY CONDITIONS OF APPROVAL, IF ANY:	TITLE		ACCEPTED FOR RECORD
*	*See Instructio	ons on Reverse Side	SEP 13 1979 AND U. S. GEOLOGICAL SURVEY HOBBS, NEW MEXICO

General: This form is designed for submitting proposals to perform certain well operations, and reports of such operations when completed, as indicated, on Fed-State law and regulations, and, if approved or accepted by any State, on all lands in such State, pursuant to applicable local, and regulations. Any pecessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office.

It there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 17: Proposals to abandon a well and subsequent reports of abandonment should include such special information as is required by local Federal and/or State offices. In addition, such proposals and-reports should include reasons for the abandonment; data on any former or present productive zones, or other zones with present significant above plass; and off by cement or otherwise; depths (top and bottom) and method of placement of cement plugs; amount, size, method of parting of any casing, liner or tubing pulled and the depth to top of any left in the hole; method of elosing top of well; and date well site conditioned for final inspection looking to approval of the abandonment. 

GPO 680-379

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