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U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

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

I. 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 ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Duthie Andrews WN	6	Langlie Mattix 7R Qn	State, Federal or Fee Fed	LC-054453
Location Unit Letter <u>I</u> ; <u>1880</u> Feet From The <u>South</u> Line and <u>760</u> Feet From The <u>South</u> <u>E</u> Line of Section <u>18</u> Township <u>23S</u> Range <u>37E</u> , 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"/>	Address (Give address to which approved copy of this form is to be sent)	
The Permian Corporation Permian (Eff. 9 / 1 / 87)	Box 1183, Houston, Texas 77001	
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)	
El Paso Natural Gas Company	Box 1384, Jal, New Mexico 88252	
If well produces oil or liquids, give location of tanks.	Unit B	Sec. 19
	Twp. 23S	Rge. 37E
	Is gas actually connected? Yes	
	When 2/4/83	

If this production is commingled with that from any other lease or pool, give commingling order number: CTB-288

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
X	X		X					
Date Spudded 11/29/82	Date Compl. Ready to Prod. 2/2/83		Total Depth 3772'		P.B.T.D. 3709'			
Elevations (DF, RKB, RT, GR, etc.) 3321.4' GR	Name of Producing Formation 7Rivers Queen		Top Oil/Gas Pay 3569'		Tubing Depth 3602'			
Perforations 3569-3631' & 3660-3666'					Depth Casing Shoe 3770'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17 1/2"	14" cond pipe		42'		2 yds Redi-mix			
11"	8-5/8" OD		400'		250 sx			
7-7/8"	5 1/2" OD		3770'		900 sx			
	2-3/8" OD		3602'					

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)

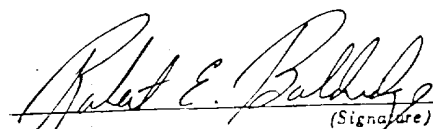
Date First New Oil Run To Tanks 1/23/83	Date of Test 2/25/83	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hrs	Tubing Pressure 90#	Casing Pressure 130#	Choke Size 64/64"
Actual Prod. During Test 217 bbls	Oil-Bbls. 85	Water-Bbls. 132	Gas-MCF 183

GAS WELL

Actual Prod. Test-MCF/D	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. 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)

2/28/83

(Date)

OIL CONSERVATION COMMISSION

APPROVED MAR 2 1983, 19
BY ORIGINAL SIGNED BY JERRY 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.

See note: Forms C-104 must be filed for each pool in multiply

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HOUSE OFFICE

DESERT DRILLING, INC.
P.O. Box 146
Hobbs, New Mexico 88240

WELL NAME AND NUMBER ARCO - Duthie Andrews Wn. #6

INCLINATION RECORD

<u>Depth</u>	<u>Deviation</u>
480	$\frac{1}{4}^{\circ}$
918	$\frac{1}{2}^{\circ}$
1386	$\frac{1}{2}^{\circ}$
1858	$\frac{1}{4}^{\circ}$
2355	$3\frac{3}{4}^{\circ}$
2860	2°
3344	1°
3770	1°

Signature R. Cheatham

State of New Mexico
County of Lea

SWORN AND SUBSCRIBED TO BEFORE ME
BY R. Cheatham

This 13 Day of December
1982.

Law McDonald
Notary Public