

OIL CONSERVATION DIVISION
PO Box 2088
Santa Fe, NM 87504-2088

Instruction on back
Submit to Appropriate District Office
5 Copies

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

¹ Operator Name and Address ARCH PETROLEUM INC. 10 DESTA DRIVE, STE. 420E, MIDLAND TX 79705		² OGRID Number 000962
⁴ API Number 30 - 025-33252		⁵ Pool Name TEAGUE/BLINEBRY R-10776 3/1/97
⁷ Property Code 014898	⁸ Property Name C. E. LAMUNYON	⁶ Pool Code 58300
		⁹ Well Number 54

II. ¹⁰ Surface Location

UI or Lot. No. D	Section 22	Township 23S	Range 37E	Lot Idn.	Feet from the 1300'	North/South Line NORTH	Feet from the 660'	East/West Line WEST	County LEA
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¹¹ Bottom Hole Location

UI or Lot. No.	Section	Township	Range	Lot Idn.	Feet from the	North/South Line	Feet from the	East/West Line	County
¹² Lse Code F	¹³ Producing Code P	Method	¹⁴ Gas Date 2-25-96	Connection	¹⁵ C-129 Permit Number	¹⁶ C-129 Effective Date	¹⁷ C-129 Expiration Date		

III. Oil and Gas Transporters

¹⁸ Transporter OGRID	¹⁹ Transporter Name and Address	²⁰ POD	²¹ O/G	²² POD ULSTR Location and Description
007440	EOTT ENERGY PIPELINE LTD. PARTNERSHIP, P. O. BOX 1660 MIDLAND, TX 79702	2816185	O	
020809	SID RICHARDSON CARBON 201 MAIN ST., FORT WORTH, TX 76102	2816187	G	

IV. Produced Water

²³ POD 2816188	²⁴ POD ULSTR Location and Description
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V. Well Completion Data

²⁵ Spud Date	²⁶ Ready Date	²⁷ TD	²⁸ PBTD	²⁹ Perforations
³⁰ Hole Size 7 7/8"	³¹ Casing & Tubing Size	³² Depth Set	³³ Sacks Cement	

VI. Well Test Data

³⁴ Date New Oil 2-23-96	³⁵ Gas Delivery Date	³⁶ Test Date	³⁷ Test Length	³⁸ Tbg. Pressure	³⁹ Csg. Pressure
⁴⁰ Choke Size	⁴¹ Oil	⁴² Water	⁴³ Gas	⁴⁴ AOF	⁴⁵ Test Method

⁴⁶ I hereby certify that the rules 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.

Signature: *Bobbie Brooks*

Printed Name:
BOBBIE BROOKS
Title:
PRODUCTION ANALYST

Date:
4-4-96
Phone:
915-685-1961

OIL CONSERVATION DIVISION

Approved by: ORIGINAL SIGNATURE
DISTRICT SUPERVISOR

Title:

Approved Date:

APR 10 1996

⁴⁷ If this is a change of operator fill in the OGRID number and name of the previous operator

Previous Operator Signature

Printed Name

Title

Date

IF THIS IS AN AMENDED REPORT, CHECK THE BOX LABELED
"AMENDED REPORT" AT THE TOP OF THIS DOCUMENT

Report all gas volumes at 15.0 PSIA at 60°.

Report all oil volumes to the nearest whole barrel.

A request for allowable for a limited or deepened well must be accompanied by a tabulation of the deviation tests conducted in accordance with Rule 11.

All sections of this form must be filled out for allowable requests on new and recompleted wells.

Fill out only sections I, II, III, IV, and the operator certifications for changes of operator, property name, well number, transporter, or other such changes.

A separate C-104 must be filled for each pool in a multiple completion.

Improperly filled out or incomplete forms may be returned to operators unapproved.

Operator's name and address

Operator's OGRID number. If you do not have one it will be assigned and filled in by the District office.

Reason for filling code from the following table:

RT Request for test allowable (include volume requested)
CG Change gas transporter
AG Add gas transporter
CO Change oil/condensate transporter
CH Add oil/condensate transporter
AO Change of Operator
RC Recommendation
NW New Well

If for any other reason write that reason in this box.

The API number of this well

The name of the pool for this completion

The pool code for this pool

The property code for this completion

The property name (well name) for this completion

The well number for this completion

The surface location of this completion. NOTE: If the United States government survey designates a Lot Number for this location use that number in the "UL or lot no." box. Otherwise use the OGD unit letter.

The bottom hole location of this completion

Lease code from the following table:

F Federal
S State
P Fee
J Jicarilla
N Navajo
U Ute Mountain Ute
I Other Indian Tribe

The producing method code from the following table:

P Flowing
F Pumping or other artificial lift

MO/DAYR that this completion was first connected to a gas transporter

The permit number from the District approved C-129 for this completion

MO/DAYR of the C-129 approval for this completion

MO/DAYR of the expiration of C-129 approval for this completion

The gas or oil transporter's OGRID number

Name and address of the transporter of the product

The number assigned to the POD from which this product will be transported by this transporter. If this is a new well or recompletion and this POD has no number the district office will assign a number and write it here.

Product code from the following table:

G Gas
O Oil

The ULSTR location of this POD if it is different from the well completion location and a short description of the POD (Example: "Battery A", "Jones CPD", etc.)

The POD number of the storage from which water is moved from this property. If this is a new well or recompletion and the POD has no number the district office will assign a number and write it here.

The ULSTR location of this POD if it is different from the well completion location and a short description of the POD (Example: "Battery A Water Tank", "Jones CPD Water Tank", etc.)

MO/DAYR drilling commenced

MO/DAYR this completion was ready to produce

Total vertical depth of the well

Plugback vertical depth

Top and bottom perforation in this completion or casing shoe and TD if openhole

Inside diameter of the well bore

Outside diameter of the casing and tubing

Depth of casing and tubing. If a casing liner show top and bottom.

Number of sacks of cement used per casing string

The following test data is for an oil well it must be from a test conducted only after the total volume of load oil is recovered.

MO/DAYR that new oil was first produced

MO/DAYR that gas was first produced into a pipeline

MO/DAYR that the following test was completed

Length in hours of the test

Flowing tubing pressure - oil wells

Shut-in tubing pressure - gas wells

Flowing casing pressure - oil wells

Shut-in casing pressure - gas wells

Diameter of the choke used in the test

Barrels of oil produced during the test

Barrels of water produced during the test

MCF of gas produced during the test

Gas well calculated absolute open flow in MCF/D

The method used to test the well:

P Flowing
F Pumping
S Swabbing
I If other method please write it in.

The signature, printed name, and title of the person authorized to make this report, the date this report was signed, and the telephone number to call for questions about this report

The previous operator's name, the signature, printed name, and title of the previous operator's representative authorized to verify that the previous operator no longer operates this completion, and the date this report was signed by that person