

District I
PO Box 1980, Hobbs, NM 88241-1980

State of New Mexico
Energy, Minerals & Natural Resources Department

Form C-104
Revised February 10, 1994

District II
PO Drawer DD, Artesia, NM 88211-0719

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

District IV
PO Box 2088, Santa Fe, NM 87504-2088

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 - 025-11211		⁵ Pool Name FOWLER ABO	
⁷ Property Code 014915		⁶ Pool Code 96455	
⁸ Property Name LILLIE		³ Reason for Filing Code RC MAY, 1996	
⁹ Well Number 3			

II. ¹⁰ Surface Location

UI or Lot. No. E	Section 23	Township 24S	Range 37E	Lot Idn.	Feet from the 2310	North/South Line NORTH	Feet from the 330	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 P	¹³ Producing Code P	Method	¹⁴ Gas Date	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 OPERATING LP P. O. BOX 1660, MIDLAND, TX 79702	718310	O	
020809	SID RICHARDSON CARBON 201MAIN ST,STE.2300 FT.WORTH,TX 76102	718330	G	

IV. Produced Water

²³ POD 718350	²⁴ POD ULSTR Location and Description
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V. Well Completion Data

²⁵ Spud Date 5/14/96	²⁶ Ready Date 5/23/96	²⁷ TD 9857'	²⁸ PBTD 6960'	²⁹ Perforations 6287-6436'
³⁰ Hole Size 17 1/2"	³¹ Casing & Tubing Size 13 3/8"	³² Depth Set 327'	³³ Sacks Cement 500 sx, Circ.	
12 1/4"	9 5/8"	3896'	2324 sx, TOC @ 35' by TS	
8 1/4"	7"	7300'	1125 sx, TOC @ 100' by TS	
	2 3/8"	6520'		

VI. Well Test Data

³⁴ Date New Oil 5/23/96	³⁵ Gas Delivery Date 5/23/96	³⁶ Test Date 5/27/96	³⁷ Test Length 24	³⁸ Tbg. Pressure	³⁹ Csg. Pressure
⁴⁰ Choke Size 47	⁴¹ Oil	⁴² Water 108	⁴³ Gas 54	⁴⁴ AOF	⁴⁵ Test Method P

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:
6-12-96

Phone:
915-685-1961

OIL CONSERVATION DIVISION

Approved by: ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

Approved Date:

JUL 8 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

22. 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.)
23. The POD number of the storage from which water is moved from this property. 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.
24. 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.)
25. MO/D/A/Y/R drilling commenced
26. MO/D/A/Y/R this completion was ready to produce
27. Total vertical depth of the well
28. Plugback vertical depth
29. Top and bottom perforation in this completion or casing shoe and TD if openhole
30. Inside diameter of the well bore
31. Outside diameter of the casing and tubing
32. Depth of casing and tubing. If a casing liner show top and bottom.
33. 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.
34. MO/D/A/Y/R that new oil was first produced
35. MO/D/A/Y/R that gas was first produced into a pipeline
36. MO/D/A/Y/R that the following test was completed
37. Length in hours of the test
38. Flowing tubing pressure - oil wells
39. Shut-in tubing pressure - gas wells
40. Flowing casing pressure - oil wells
41. Shut-in casing pressure - gas wells
42. Diameter of the choke used in the test
43. Barrels of oil produced during the test
44. Barrels of water produced during the test
45. MCF of gas produced during the test
46. Gas well calculated absolute open flow in MCF/D
- The method used to test the well:
- F Flowing
P Pumping
S Swabbing
U Ute Mountain Ute
N Navajo
J Jicarilla
P Pecos
F Federal
47. 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
14. MO/D/A/Y/R that this completion was first connected to a gas transporter
15. The permit number from the District approved C-129 for this completion
16. MO/D/A/Y/R of the C-129 approval for this completion
17. MO/D/A/Y/R of the expiration of C-129 approval for this completion
18. The gas or oil transporter's OGRID number
19. Name and address of the transporter of the product
20. 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.
21. Product code from the following table:
- G Gas
O Oil
3. Reason for filling code from the following table:
- NW New Well
RC Recompletion
CH Change of Operator
AO Add oil/condensate transporter
CO Change oil/condensate transporter
AG Add gas transporter
CG Change gas transporter
RT Request for test allowable (include volume requested)
4. The API number of this well
5. The name of the pool for this completion
6. The pool code for this pool
7. The property code for this completion
8. The property name (well name) for this completion
9. The well number for this completion
10. 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 OCD unit letter.
11. The bottom hole location of this completion
12. Lease code from the following table:
- F Federal
S State
P Fee
J Jicarilla
N Navajo
U Ute Mountain Ute
I Other Indian Tribe
13. The producing method code from the following table:
- F Flowing
P Pumping or other artificial lift
46. 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
47. 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