Appropriate District Office DISTRICT J P.O. Box 1980, Hobbs, NM 88240

Fargy, Minerals and Natural Resources Department

Revised 1-1-29 See Instructions at Bottom of Page

DISTRICT E P.O. Drawer DD, Assesia, NM 88210

OIL CONSERVATION DIVISION P.O. Box 2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION

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

Santa Fe, New Mexico 87504-2088

<u>L</u>		10 IM	NSPU	JAT UIL	. ANU NA	UNALO	Wall	OPI No.			
Operator ARCO OIL & GAS COMPANY								30 025 115 86			
Address P. O. BOX 1710 HOBBS, NEW MEXICO 88240											
Resson(s) for Filing (Check proper box)						a (Please explo	لعنب				
New Well		Change is	Transpo	eter of:	n-						
	Oil		Dry Ca		ADD T	RANSPORTI	ER (GAS)		•		
Recompletion		d Gas 📋	٠ -	_							
If change of operator give name and address of previous operator											
II. DESCRIPTION OF WELL	ANDIE	ASE									
Lesse Name	_	Well No.	1	-	ng Formation	IIRR DOTAN	944	Pederal or Fe	NM L	mae No. 10941 A	
Location											
Unit LetterA	•										
Section / 4 Township	, 25	<u>s</u>	Range	37	E N	<u>трм, </u>	L	EA		County	
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS											
Name of Authorized Transporter of Oil KXX or Condensate Address (Give address to which approved copy of this form is to be sent)											
TEXAS NEW MEXICO PIPELINE COMPANY P O BOX 2528 HORRS, NEW MEXICO 88241											
Name of Authorized Transporter of Casinghead Gas or Dry Gas SID RICHARDSON CARBON & GASOLINE CO.					P.O. Box	1226 by	ai PNM	copy of this form is to be sent)			
	PROBUCTION DE CO. IP. O				IP. O. B	O. Box 3000 Tulsa, 0k 74102 gas actually connected? When 7					
well produces oil or liquids, Unit Sec. Twp. Rgs.				Yes			•				
	TODE RELY OF	er lease or	pool, giv	re comming!		er:					
If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA											
	~	Oil Well		Gas Well	New Well	Workover	Deepea	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion		Dandii te			Total Depth		L	P.B.T.D.	L		
Date Spudded	Date Compl. Ready to Prod.				•			r.p. (
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation				Top Oil/Gas Pay			Tubing Depth			
Perforations								Depth Casing Shoe			
TUBING, CASING AND CEMENTING RECORD											
					DEPTH SET			SACKS CEMENT			
HOLE SIZE	CASING & TUBING SIZE				DEFINACI			GHORD CEMENT			
	 										
					<u> </u>			L			
V. TEST DATA AND REQUES	T FOR A	LLOW	ABLE		-ء مه لمسمه	مالد عما فموميد	nuable for this	death as he	for full 24 hour	rs.)	
OIL WELL (Test must be after re			of load a	oi and must	Producine Me	thod (Flow. pu	mp, gas lift, e	10.)	- J=1 64 AU	,	
Date First New Oil Rua To Tank	ew Oil Rua To Tank Date of Test					Producing Method (Flow, pump, gas lift, etc.)					
Length of Test	Tubing Pressure				Casing Pressure			Choke Size			
					mi Bul			Gas- MCF			
Actual Prod. During Test	Oil - Bhe				Water - Bbls.						
GAS WELL	1										
Actual Prod. Test - MCF/D	Length of	Tool			Bbls Conden	mic/MMCF		Gravity of C	Condensate		
					Casing Pressure (Shut-ia)			Choke Size			
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)					Cathy Freshite (Show-say					
VI. OPERATOR CERTIFICATE OF COMPLIANCE						OH CONCEDIATION DIVICION					
I hereby certify that the rules and regulations of the Oil Conservation					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	1 - JUL-	1 9 199	3		
Jamel Cybra					By	ORIGINAL					
JAMES COGBURN OPERATIONS COORDINATOR					DISTRICT I SUPERVISOR						
Printed Name	Tale (505) 391-1621				Title.						
Printed Name (/2/93 Dute	(505)	191-11 Tok	621 ephons N	ia.							

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

- Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
 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.

DECENED

1982 - 1982