

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator ARCO OIL & GAS COMPANY		Well APN No. 30 025 11750
Address P. O. BOX 1710 HOBBS, NEW MEXICO 88240		
☒ Other (Please explain)		
Reason(s) for Filing (Check proper box)		
New Well ☐	Change in Transporter of:	ADD TRANSPORTER (GAS)
Recompletion ☐	Oil ☐ Dry Gas ☐	
Change in Operator ☐	Casinghead Gas ☐ Condensate ☐	
If changes of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE		Well No.	Pool Name, including Formation	Kind of Lease State, Federal or ☒ Fee	Lease No. <u>EEF</u>
Lease Name SOUTH JUSTIS UNIT "E"		19	JUSTIS BLINERRY TURB DRINKARD		
Location Unit Letter <u>D</u> : <u>660</u> Feet From The <u>NORTH</u> Line and <u>660</u> Feet From The <u>WEST</u> Line					
Section <u>24</u> Township <u>25 S</u> Range <u>37 E</u> , NMPM, LEA County					

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS		Address (Give address to which approved copy of this form is to be sent)				
Name of Authorized Transporter of Oil ☒ or Condensate ☐	TEXAS NEW MEXICO PIPELINE COMPANY	P O BOX 2528 HOBBS, NEW MEXICO 88241				
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐	SID RICHARDSON CARBON & GASOLINE CO. TEXACO EXPLORATION & PRODUCTION	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1226 Jal, N.M. 88252 P. O. Box 3000 Tulsa, Ok. 74102				
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected? Yes	When?

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	Deepen	Plug Back	Same Res'v	Diff Res'v
Designate Type of Completion - (X)									
Date Spudded	Date Compl. Ready to Prod.	Total Depth				P.B.T.D.			
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			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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 Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL			
Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE	
I hereby certify that the rules and regulations 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 <u>James Cogburn</u>	OPERATIONS COORDINATOR
Printed Name <u>James Cogburn</u>	Title
Date <u>6/21/93</u>	Telephone No. <u>(505) 391-1621</u>

OIL CONSERVATION DIVISION JUL 19 1993	
Date Approved _____	
By _____	ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR
Title _____	

- 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.