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State of New Mexico Energy, Minerals and Natural Resources Department

IRICT II Drawer DD, Arceia, NM 88210

OIL CONSERVATION DIVISION

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

DISTRICT III
1000 Rio Brisos Rd., Ariec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

l.		IU IN	1110	CITI OIL	_ / 11 12 14/		Well	API No.		1	
Operator ARCO 011 and Gas	Compan	v						30	-025-24	1168	
Address											
P.O. Box 1710 - F	lobbs,	New Me	xico	88241	. – 1710 x Ou	ver (Please expl	ain) Chan	ce Woll	Name Fr	OM	
Reason(s) for Filing (Check proper box)		Change in	Trans	porter of:	(X) O.	M (1 11-11-11-11-11-11-11-11-11-11-11-11-11		•			
New Well Recompletion	Oil		Dry (• —					JH	1	
Change in Operator	Casinghea	4 Gas 🔲	Cond	leosate 🗌			Effe	ctive:	1~/-	93	
If change of operator give name											
and address of previous operator	ANDIE	CE									
IL DESCRIPTION OF WELL Lesse Name	7	Well No.	Pool	Name, Include	ing Formation			of Lease	1 -	ease No.	
South Justis Unit "		13				ubb Drink	card Sime,	Federal or Fe	* F	F.E.	
Location Unit Letter	. 17	50	_Feat !	From The _S	OUTH Lie	c and <u>23/</u>	<u> </u>	et From The	JEAST	Line	
Section / 2 Townshi	p 25	<u>s</u>	Rang	re 37	E N	MPM,	Lea	<u> </u>		County	
III. DESIGNATION OF TRAN	SPORTE	R OF O	IL A	ND NATU	RAL GAS		TA				
Name of Authorized Transporter of Oil		or Conden	sale		Amorrae (O.					l	
Texas New Mexico Pine	line Co	ine Company				Box 2528	- Hobbs	NM come of this	88241-25	28	
Name of Authorized Transporter of Casin	ghead Gas LX		or bry Gas []		Address (Give address to which a					,	
Sid Richardson Carbon. If well produces oil or liquids,	_and Ga IUnit	soline Sec	COII	npany Rec	Is gas actual	y connected?	When				
rive location of tanks.	i	_	i	_i	<u> </u>		I				
If this production is commingled with that	from any oth	er lease or	pool, s	give comming	ling order num	ber:			·		
IV. COMPLETION DATA				Gas Well	New Well	· ·	Deepes	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion		Oil Well	i_		Total Depth		<u></u>	İ			
Date Spudded	Date Compl. Ready to Prod.						P.B.T.D.				
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation			Top Oil/Gas Pay			Tubing Depth				
Perforations								Depth Casing Shoe			
		TIRING	CAS	SING AND	CEMENTI	NG RECOR	D	'			
HOLE SIZE	CASING & TUBING SIZE				DEPTH SET				SACKS CEMENT		
Trock dike											
					 			 			
	ļ				 						
V. TEST DATA AND REQUE	ST FOR	LLOW	ABLI	E	1						
OIL WELL (Test must be after t	recovery of K	eal volume	of load	d oil and must	be equal to or	exceed top all	owable for this	s depth or be	for full 24 hou	2)	
Date First New Oil Run To Tank		Producing M	ethod (Flow, pe	emp, gas igi, e	ac.)						
Length of Test	Tubing Pressure				Casing Pressure			Choke Size			
				Water - Bbla.			Gas- MCF				
Actual Prod. During Test	Oil - Bbls.						<u> </u>				
GAS WELL					180. 2	mis A A LPC		Gravity of C	Codenssia		
Actual Prod. Test - MCF/D	Length of Test				Bbls. Condensate/MMCF						
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size			
VL OPERATOR CERTIFIC	ATE OF	COMI	ZLIA	NCE		OIL CON	ISERV	ATION	DIVISIC	N	
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.					Date ApprovedJAN - 7 1993						
1-10	a			_		ORIGINAL!		Y JERRY S	EXTON		
Jones D. Cogburn - 0	peration	ons Coo	rdi	nator.	By_	9/51	MEGTISU	PERVISOR			
Printed Name	a 	(505)	Title		Title		700	ONLY	MA	Y 25 199	
200			enhone			REC(レベル	ヘルドム		. ~~ .00	

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.