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SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR		1	
PRORATION OFFICE			

Accountant I

3/27/78

(Title)

(Date)

SANTA FE	i i	NEW MEXICO OIL CONSERVATION COMMISSION Form C-104			
FILE	REQUEST	REQUEST FOR ALLOWABLE Supersedes Old C-104 and C-11 Effective 1-1-65			
U.S.G.S.	AUTHORIZATION TO TR	AND	CAS		
LAND OFFICE	AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL	GAS		
OIL					
TRANSPORTER GAS					
OPERATOR					
PRORATION OFFICE					
Operator					
Atlantic Richfield (Company				
Address					
	os, New Mexico 88240				
Reason(s) for filing (Check proper l		Other (Please explain)			
New Well	Change in Transporter of:				
Recompletion	Oil Dry G	 			
Change in Ownership	Casinghead Gas Conde	ensate			
If change of ownership give name	٤				
and address of previous owner					
H. DESCRIPTION OF WELL AN	D. I. C. A.C.C.				
II. DESCRIPTION OF WELL AN	Well No. Pool No.	ame, Including Formation	Kind of Lease		
Lanehart 22	1 Lang	glie Mattix 7RQn	State, Federal or Fee Fee		
Location		<u></u>			
Unit Letter D ; 6	60 Feet From The North Li	ne and 660 Feet From	The West		
Onit Letter;	y reet from the HOZEM	the did			
Line of Section 22	Township 25S Range	37E , NMPM,	Lea County		
<u> </u>					
III. DESIGNATION OF TRANSPO	ORTER OF OIL AND NATURAL G	AS			
Name of Authorized Transporter of		Address (Give address to which appr			
Scurlock Oil Compan		1216 Vaugh Bldg, Midla			
Name of Authorized Transporter of		Address (Give address to which appr			
El Paso Natural Gas		Box 1384, Jal, New Mexico 88252			
If well produces oil or liquids,	Unit Sec. Twp. Rge. D 22 25S 37E	Is gas actually connected? W	hen 3/20/78		
give location of tanks.	- D ZZ Z33 37E	165	3,20,70		
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 Restv. Diff. Restv.		
Designate Type of Comple	etion $-(X)$ X	1 1	1		
Date Spudded	Date Compl. Ready to Prod.	Total Depth3538.77 TVD	P.B.T.D.		
·	1/30/78	3655' MD	3495' MD		
12/21/77 Pool	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth		
Langlie Mattix	Seven Rivers Queen	3356'	3225'		
Perforations	J Beven Rivers Queen		Depth Casing Shoe		
3356-3476' (223	9" holes)		3655'		
3330 3170 (== 10		ID CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
12-1/4"	8-5/8" OD	980'	550		
7-7/8"	4-1/2" OD	3655 '	1315		
	2-3/8" OD	3225'			
		<u>İ</u>	<u>i. </u>		
V. TEST DATA AND REQUEST			il and must be equal to or exceed top allow-		
OIL WELL		depth or be for full 24 hours) Producing Method (Flow, pump, gas	lift etc.		
Date First New Oil Run To Tanks	Date of Test		11, 1001)		
1/30/78 Length of Test	3/23/78 Tubing Pressure	Flow Casing Pressure	Choke Size		
			24/64"		
7-1/2 hrs Actual Prod. During Test	208 Oil-Bbls.	Pkr Water-Bbls.	Gas-MCF		
		1	93		
1	100	<u> </u>			
GAS WELL					
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate		
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size		
			·		
VI. CERTIFICATE OF COMPLI	ANCE	OIL CONSERV	ATION COMMISSION		
VI. CERTIFICATE OF COMPEL	ANCE	1000	197R		
I haraby acutify that the rules a	nd regulations of the Oil Conservation	APPROVED	, 19		
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		- 11			
		BY And Alleryns			
		TITLE	TITLE		
	, 1 / /		compliance with BIII F 1104		
D. L. Sha	children	If this is a request for all	This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepened		
- Mysor yestille	i≥natu r e)	well, this form must be accomp	panied by a tabulation of the deviation		
A =	, s.m.Z)-/	tests taken on the well in acc	ordance with RULE 111.		

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

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

Fill out Sections I, II, III, and VI only for changes of owner, well name or number, or transporter, or other such change of condition.

Canada Forms C-104 must be filed for each nool in multiply

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MAR 2 8 1978

OH, CONSERVATION TO AIM, HORBS, & M.