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

State of New Mexico Energy, Minerals and Natural Resources Departmen.

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

OIL CONSERVATION DIVISION P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

permor							Well	API No.		,		
ARCO OIL & GAS CO	MPANY						30-	-025-317	79 🗸			
dress					0010							
P O BOX 1710	HOBBS	, NEW	MEX	ICO 8	8240							
son(s) for Filing (Check proper box)				_		A COLON		mramtva	AT T 011A T	ITE OF		
w Well ⊠		Change in		• —		ASSIGN				SLE OF		
completion	Oil	_	,	_	1000 E	BLS FOR	MONTH (OF MARCH	, 1993.			
ange in Operator	Caninghea	d Gas	Con	densate	<u> </u>							
bange of operator give name address of previous operator												
•	ANDIE	CE										
	ESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including					ne Formation			. L	Lease No.		
no treatme					LINEBRY	CD. State,	State, Federal of Fee					
SOUTH SUSTIS UNIT				OCOIIO D	DINDIN	1022	990					
Α	Ā	990	Feet	From The _N	ORTH Lin	and 95	:0`	eet From The	EAST	<u>Lin</u>		
Unit LetterA	- ·	224										
Section 26 Townsh	i p 25	S	Ran	ge 37 E	, N	MPM,	LEA	<u> </u>	·	County		
I. DESIGNATION OF TRAN	SPORTE	R OF O	<u>IL A</u>	ND NATU	RAL GAS	e address to wi	hich approve	d come of this !	form is to be a	ent)		
ame of Authorized Transporter of Oil	XX	or Conden			1	X 2528 I						
TEXAS NEW MEXICO			ANY	ory Gas		e adáress to w						
ame of Authorized Transporter of Casis					1	X 1226				•		
SID RICHARDSON CA	Unit	Sec.	Two					When ?				
we incution of tanks.	1	-	, , 	i		YES		03/0	2/93			
this production is commingled with that	from any ot	er lease or	pool,	give comming	ing order num	xer:						
V. COMPLETION DATA			•						-,			
		Oil Well		Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v		
Designate Type of Completion			1		1 B - 1		<u> </u>	1	L	<u> </u>		
ste Spudded	Date Com	Date Compl. Ready to Prod.				Total Depth			P.B.T.D.			
					Top Oil/Gas		Tubing Depth					
levations (DF, RKB, RT, GR, etc.)	Name of P	Name of Producing Formation										
erforations				 	<u> </u>			Depth Casin	ng Shoe			
		UBING.	CA	SING AND	CEMENTI	NG RECOR	D					
HOLE SIZE		CASING & TUBING SIZE			DEPTH SET			SACKS CEMENT				
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,								<u> </u>				
					<u> </u>							
			A TO F	<u> </u>				_l				
TEST DATA AND REQUE OIL WELL (Test must be after	ST FOR	ALLOW	ABL	. E 	he ented to or	exceed top all	muable for th	is depth or be	for full 24 ho	urs.)		
			of loc	ga ou ana musi	Producing M	ethod (Flow, p	ump, gas lift,	etc.)	<u> </u>			
Date First New Oil Run To Tank	Date of Test											
eagh of Test	Tubing Pressure				Casing Pressure			Choke Size				
regul Ut 1644								Con MCE				
Actual Prod. During Test	Oil - Bbls.				Water - Bbis.			Gas- MCF				
GAS WELL												
AS WELL comit Prod. Test - MCF/D Length of Test					Bbls. Conder	sate/MMCF		Gravity of	Condensate			
								Choke Size				
esting Method (pitot, back pr.) Tubing Pressure (Shut-in)			t-in)		Casing Press	Casing Pressure (Shut-in)		CRULE SIZE				
												
L OPERATOR CERTIFIC	CATE O	COMI	PLL	ANCE		DIL CON	ISERV	/ΔΤΙΩΝ	DIVISIO	NC		
I hambe certify that the rules and rem	alations of the	Oil Const	evatio	e e	11 '		AOEN V	ALION	D1 4 101	J14		
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.					_			\$ 2 g to	0 5 1803			
is true and complete to the best of my	knowledge i	ma Déiléi.			Date	Approve			ુનું હિંગન	<u> </u>		
1. 06							Orig. Sig					
flow lyl					By_		Paul E	zautz erlet				
JAMES COGEURN O	PERATIO	NS COO	RDI	NATOR			Man	Page Anni Page				
Printed Name	_		Titl	e	Title		·					
03/04/93			39	<u>11-1621</u>								
		T-1		SE DIO								

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.