## Submit 5 Copies Appropriate District Office DISTRICT 1 Description (URO), Hobbs, NM

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-89

2.0. Box 1980, Hobbs, NM 88240	OIL CONSERV	at Bottom of Page						
DISTRICT II P.O. Drawer DD. Artema, NM 88210	2.0.	P.O. Box 2088  Santa Fe. New Mexico 87504-2088						
NSTRICT III 000 Rio Brazos Rd., Aziec, NM 87410		/ABLE AND AUTHORIZ	ATION					
Operator		OIL AND NATURAL GAS	<u>S</u>					
ARCO Oil & Gas Co	mpany		Well API No. 30+925-32084					
Address Box 1610, Midland	i, TX 79702							
leason(s) for Filing (Check proper box)		Other (Please expiau	2/					
New Well	Change in Transporter of:	<u> </u>						
Recompletion	Oil Dry Gas	=						
change of operator give name	Casinghead Gas Condensate							
nd address of previous operator  L DESCRIPTION OF WELL	ANDIEACE							
Lease Name	Well No.   Pool Name, inc	iuding Formation	Kind of Lease No.					
South Justis Unit	44 44	Blbry-Tubb-Dkrd	State Code To					
Unit Letter E	: 1600. Feet From The	North Line and 100	Feet From The West Line					
Section 13 Townsh	ip <u>25–S</u> Range 37	7-E , <b>nmpm</b> , Lea	County					
II. DESIGNATION OF TRAN	NSPORTER OF OIL AND NAT							
Vame of Authorized Transporter of Oil	or Condensate —	Address (Give address to which	n approved copy of this form is to be sent)					
Tex-New Mex Pipeli  Name of Authorized Transporter of Casis		Box 2528, Hob	bs. NM 88240					
Sid Richardson Gas	oline/Texaco E&P Co		h approved copy of this form is to be sens) 7410					
f well produces oil or liquids,		ge. 1 is gas actually connected?	NM 88292/Box 3000, Tulsa   When?					
ve location of tanks.		yes	1-2-94					
this production is commingled with that V. COMPLETION DATA	from any other lease or pool, give commi	ingling order number:						
Designate Type of Completion	- (X)   Gas Well	New Well Workover	Deepen Plug Back Same Res'v Diff Res'v					
ate Spudded	Date Compi. Ready to Prod.	Total Depth	P.B.T.D.					
11-17-93	11-25-93	6050 <b>'</b>	5990 <b>'</b>					
(levations (DF, RKB, RT, GR, etc.) 3101 GR	Name of Producing Formation Blbry-Tubb-Dkrd	Top Oil/Gas Pay	Tubing Depth					
erforations	in i	5118'	5979 Depth Casing Shoe					
5118-5960'			6050					
NOI E CIZE		D CEMENTING RECORD						
12-1/4	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
7-7/8	4-1/2	6050						
,,,,,	2-3/8	5979 t	1/85					
. TEST DATA AND REQUES		13:3						
IL WELL Test must be after r		ust be equal to or exceed top allowa	ible for this depth or be for full 24 hours.)					
ate First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump	. gas lift. etc.)					
ength of Test	1-13-94 Tubing Pressure	Pump Casing Pressure	Choke Size					
24 hrs	Tubing Fressure	Casing Pressure	CHORE SIZE					
ctual Prod. During Test	Oil - Bbls.	Water - Bbis.	Gas- MCF					
GAS WELL	. J	0	12					
ctual Prod. Test - MCF/D	Length of Test	Bbis, Condensate/MMCF	Gravity of Condensate					
sting Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size					
I. OPERATOR CERTIFIC	ATE OF COMPLIANCE	OIL CONS	EDVATION DIVISION					
I hereby certify that the rules and regular Division have been complied with and		OIL CONS	ERVATION DIVISION					
is true and complete to the best of my i		Date Approved	FEB 02 1994					
Ken av Soln	ell	ORIGINA	AL SIGNED BY JERRY SEXTON					
Signature Ken W. Gosne	11		DISTRICT I SUPERVISOR					
Printed Name	Title	Title	rri <b>y</b>					
1-31-94 Date	915 688-5672 Telephone No.							
	respines (40)	11						

- 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.

nit 5 Copies coriate District Office ICT | Cor 1980, Hobba, NB4 88240

## State of New Mexico Energy, Minerals and Natural Resources Departme.

P.O. Drawer DO, Annela, NM 88210

## OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brasos Rd., Astec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION

1.	7	TO TRA	NSP	ORT OIL	AND NA	TURAL G	AS		·			
Operator  ARCO OIL & GAS COM				We	30 025 3208 4·							
Address P. O. BOX 1710		, NEW	MEAI		88240					-		
Resear(s) for Filing (Check proper box)	повьз	, NEW	FIEAI			et (Please exp	lais)		<u>, ,</u>			
Now Well		Change in	Тпакро	orter of:	Pleas	se assign	n a 500	) bbl tèa	sting al	lowable		
Recompletion	01		Dry Ge		for t	he month	n of Ja	nuary 19	94.			
Change in Operator	Casinghese	d Cas 🗌	Conde	mb U						<del></del>		
If change of operator give same and accreas of previous operator										<del></del>		
•	ANDIE	CF										
IL DESCRIPTION OF WELL Lesse Name	AND LEA	Well No.	Pool N	ame, Includi	ng Formation		Kin	d of Lesses		esse Na		
1	.n E 11	160	1			URR DRIN	IKARDXX	X FOR YOUR OF POR	Resident or Pee			
Location												
Unit LetterE	_ :l	600	Foot Fr	on The N	ORTH Line	bes :	100	Feet From The .	WEST	Line		
12	. 25	c	_	37 1		<b>лрм</b> ,		LEA		County		
Section () Townshi	<u> </u>	3	Range	37	<u> </u>	nr my		<u></u>				
III. DESIGNATION OF TRAN	SPORTE	R OF O	IL AN	D NATU	RAL GAS							
Name of Authorized Transporter of Oil	KXX	or Conden		$\overline{\Box}$	Address (Giv	e address 10 w	hick approv	ed copy of this fe	orm is to be se	w)		
TEXAS NEW MEXICO P		COMPA	NY					NEW MEXI				
Name of Authorized Transporter of Casing	ghead Gas	$\square$	or Dry		P. U. BOX	1226 6 T	al, N.	M. 88252	orm is to be see	w)		
SID RICHARDSON CAR		merrod	E CO	_,	ls gas actually	ox 3000_	Tulsa	, Ok. 741	.02			
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Les	Rge	Yes	, company	"-	•				
If this production is commingled with that	from say oth	er lease or i	pool giv	re commingli		xer:						
IV. COMPLETION DATA	,, our <b>-</b> , our											
Designate Type of Completion	· (X)	Oi Well	7	Cas Well	New Well	Workover	Decpes	Plug Back	Same Res'v	Diff Res'v		
Date Spudded	Date Compl	L Ready to	Prod		Total Depth			P.B.T.D.				
	ļ :	•										
Elevations (DF, RKB, RT, GR, etc.)	Name of Pro	oducing Fo	matica		Top Oil/Cas I	'ay		Tubing Dept	Tubing Depth			
Perforations	<u> </u>				Depth Casing Shoe							
		IDDIC	CASD	JC AND	CEMENTIN	G RECOR	D					
HOLE SIZE		ING & TU			CEMENTING RECORD DEPTH SET			SACKS CEMENT				
TRAL GEE	<del> </del>											
								<del>- </del>				
I MENT DATA AND DECLIES	T FOR A	HOWA	RIF						<del></del>			
V. TEST DATA AND REQUES OIL WELL (Test must be ofter re	il FUK A	LLUTTA A valume a	al lood o	il and must i	be equal to or	exceed top allo	mable for il	is depth or be fo	er full 24 kours	r.)		
Date First New Oil Rus To Talk	Date of Test		,		Producing Me	thad (Flow. P.	mp, gas lift,	etc.)				
1-13-94		1-	13-9	4	PUM			Choke Size				
Length of Test	Tubing Pres	eure .			Casing Pressu	<b>18</b>		CBORE SIZE				
24		$\geq \leq$			Water - Bbla		<del></del>	Gas- MCF				
Actual Prod. During Test	Qil Bble	_ `			0			12				
5	<u> </u>			<del></del> ,				······································	<del></del>			
GAS WELL Actual Frod Test - MCF/D	T	<u>.</u>		$\longrightarrow$	Bala Condens	ale/MMCF		Gravity of Co	ndensate			
Actual Prof. 188 - MICHU	Length of Test											
Testing Method (pitot, back pr.)	Tubing Pres	aure (Shut-	<b>a</b> )		Casing Pressur	e (Shut-ia)	Choke Size					
	<u></u>	~~~			ſ							
VI. OPERATOR CERTIFICA	ATE OF	COMPI	LLAN	CE		IL CON	SERV	ATION [	DIVISIO	N		
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above					JAN 18 1994							
is true and complete to the best of my k	nowledge and	belief.			Date	Approved		- 100				
	, .											
Jaryson	Taylow					By DISTRICT I SUPERVISOR						
JAMES COGBURN	OPERATI			NATOR	J. S.							
Printed Name 1-14-94	(505) 3	391-162	Table		Title_				<del></del>			
Date		Tolep	home No	<b>\</b>	Ì							

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