| DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE I RANSPORTER GAS OPERATOR PROFATION OFFICE Operator | REQUEST | . D. | Poim C-104 Supersedes Old C-104 and C-11 Elloctive 1-1-65 GAS |
|--|--|--|---|
| Anadarko Petroleum C | orporation | | |
| P. O. Box 2497 Midl Reason(s) for filing (Check proper box New Well Recompletion Change in Ownership X If change of ownership give name | Change in Transporter of: Cil Dry Go Casinghead Gas Conde | AUG AUG | <u>. 15 1980</u> • |
| DESCRIPTION OF WELL AND Lease Name Loco Hills Federal Con Location Unit Letter L ; 198 | LEASF Well No. Pool Name, Including F | ormation Kind of Lease errow, So. (Gas) State, Federa | LC LC D28936(d) |
| Line of Section 29 To | wnship 17S Range | 30E . NMPM. | Eddy County |
| DESIGNATION OF TRANSPOR Nome of Authorized Transporter of On Navajo Refining Compan Nome of Authorized Transporter of Co Transwestern Pipeline If well produces oil or liquids, give location of tanks. | ny - Truck Division singhead Gas or Dry Gas XX. | Address (Give address to which approximately P.O. Box 159, NM 8821) Address (Give address to which approximately P.O. Box 2521, Houston Yes | O ved copy of this form is to be sent) , TX 77001 |
| I this production is commingled wi | th that from any other lease or pool, | give commingling order number: | |
| Designate Type of Completion | on - (X) Gas Well | New Well Workover Deepen | Plug Back Same Restr. Diff. Restr. |
| Date Spudded | Date Compl. Ready to Prod. | Total Depth | P.B.T.D. |
| Elevations (DF, RKB, RT, GR, etc., | Name of Producing Formation | Top Otl/Gas Pay | Tubing Depth Depth Casing Snoe |
| Periorations | | | Depth Cusing snoe |
| , HOLE SIZE | TUBING, CASING, AND CASING & TUBING SIZE | DEPTH SET | POST FO-3 9-6-85 Chy Op Name |
| FEST DATA AND REQUEST FOOL, WELL Date First New Oil Run To Tonks | | fier recovery of socal volume of load oil a psh or be for full 24 hours) Producing Mathod (Flow, pump, gas lif | and must be equal to or exceed top allow- |
| Length of Teet | Tubing Pressure | Cosing Pressure | Choke Size |
| Actual Fred. During Test | Cil-Bbls. | Water - Bbls. | Gas-MCF |
| GAS WELL Actual Frad. Test-MOF/D | Length of Test | Bale, Condensote/MMCF | Gravity of Condensate |
| Teating kiethed (pitot, back pr.) | Tubing Fress we (shut-in) | Cosing Fressure (Shut-in) | Choke Size |
| ERTIFICATE OF COMPLIANCE | | OIL CONSERVATION COMMISSION | |
| hereby certify that the rules and regulations of the Oil Conservation commission have been compiled with and that the information given bove is true and complete to the best of my knowledge and belief. [Signature] | | APPROVED AIG 29 1985 Original Signed By Les A. Clements TITLE Supervisor District II This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or despended well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111. | |
| Sr. Administrative Specialist (Title) July 24, 1985 (Dute) | | All sections of this form must be filled out completely for slices able on new and recompleted wells. Fill out only Sections I. II. III, and VI for changes of owner, well name or number, or transporter, or other such change of condition. Frintle Forms C-104 must be filed for each pool in multiply | |