

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

See Instructions
at Bottom of Page

DISTRICT II
P.O. Drawer D11, Artesia, NM 88210

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

DISTRICT III
1000 Rio Brazo Rd., Aztec, NM 87410

**REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS**

I.

Operator Anadarko Petroleum Corporation		Well API No. 30-025-25699 ✓
Address P.O. Drawer 130, Artesia, New Mexico 88211-0130		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input type="checkbox"/>	Change in Transporter of: <input type="checkbox"/> Effective 2/1/93	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	
Change in Operator <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
If change of operator give name and address of previous operator ARCO Oil & Gas Company, P.O. Box 1610, Midland, TX 79702		

II. DESCRIPTION OF WELL AND LEASE

Lease Name Langle/ Deep	Well No. 1	Pool Name, including Formation Langley Devonian Gas	Kind of Lease State (Federal) or Fee	Lease No. LC-030133(b)
Location Unit Letter C : 990 Feet From The North Line and 2310 Feet From The West Line Section 28 Township 22S Range 36E , NMPM , Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Texas-New Mexico Pipeline	Address (Give address to which approved copy of this form is to be sent) Box 2528, Hobbs, NM 88240	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Warren Petroleum Company Std Richardson Carbon & Gasoline Co.	Address (Give address to which approved copy of this form is to be sent) Box 1382, Tulsa, OK 74102 Box 1226, Jala, NM 88252	
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 28
	Twp. 22	Rge. 36
	Is gas actually connected? Yes	
	When? EPNG 2/21/80 Warren 5/4/80	

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate: Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (D1", RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
Perforations						Depth Casing Shoe		

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL. (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)


Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas- MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size


VI. OPERATOR CERTIFICATE OF COMPLIANCE

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.

Signature 	
B. W. Griffin	Div. Drlg. Engr.
Printed Name	Title
2-12-93	(915) 682-1666
Date	Telephone No.

OIL CONSERVATION DIVISION

FEB 15 1993

Date Approved
Signed by 
By Paul Kautz
Geologist
Title

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.