	on be carred accessed											
	DISTRIBUTION		4 "	NEW ME	IXICO OIL	CONSERVATION C VISSION				Poim C-104		
	SANTA FE		T FOR ALLOWABLL				Supersedes Ol Elloctivo 1-1.	ld C-104 and (
	FILE		EIVERDBY				Pilactias I-1+	63				
	U.S.G.S.		_ A	UTHORIZAT		RANSPORT OIL AND NATURAL			GAS			
	OIL	AUG	12 1985									
	IRANSPORTER GAS	1	C D	I								
	OPEC.ATOR	re (x 0 0)						. C. D.				
,	PROPATION OFFICE		7	Ĺ	ARTE	SIA, OFFICE		_				
•	Chetatot											
	Anadarko Petroleu	m Co	rporati	lon /								
	Address											
	P. O. Box 2497, Midland, Texas 79702											
	New We!! Other (Please explain) Change in Transporter of: Change in ownership effective:											
	New Well Recompletion		CII		Dry G		onan 60	211 041102	J			
	Change in Ownership XX		_	singhead Gas	í	ensale [] AUG 1, 1985,						
!												
	If change of ownership give and address of previous own		Anada	rko Produci	tion Com	pany, P. C). Box	2497, Mi	dland,	Texas 7	9702	
	and accress of previous on											
н. ј	DESCRIPTION OF WELL	ormation Kind of Lea			Lease No							
İ	State "H" 2 Square Lake G					1						
[State "H"	Lake Gri	og.,San An	Jointo, Feeting	S	<u>tate</u>	<u>J B-2884</u>					
	Location	660		Non	1		080				•	
	Unit Letter B:	-000	Fe	et From The Nor	LII Li	ne and <u>1000 /</u>	780	Feet rom	TheE	ast		
- 1	Line of Section 36	Т	wnship	16S	Range	30E	, NMPM		E	ddv	County	
L	Line of occurs.											
II. I	DESIGNATION OF TRAN	SPOR	TER OF	OIL AND NA	TURAL GA	NS						
ſ	Name of Authorized Transporte	e: cl Ci	1 🗴	or Condensate (Andress (Give		to which appro-			o be sent)	
į		Navajo Refining Company - Trans & Supply					159, A	Artesia, l	NM 8821	<u>)</u>	. he read	
	Active of Active 22 and Active						e aadress i	o waten approi	vea copy oj	inis jorm is it	o be sensy	
-	None !											
	If well produces oil or liquids,											
'	VIII.											
	If this production is commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA											
Γ			(2)	Oil Well	Gas Well	New Well	Horkover	Deepen	i Plug Baci	Same Res'	v. Diff. Rest	
-	Designate Type of Cor	mpieti	on — (X)	<u> </u>) 	1			!			
Ī	Date Spudded		Date Co	mpl. Ready to Pro	a.	Total Depth			P.B.T.D.			
	Flexations (DF RKR RT CR etc.: Name of Producing Formation					LTa- Oll/Car Pay			Tubing Depth			
	Clevations (DF, RKB, RT, GR,	Top O!1/Gas Pay			, asing septin							
L	Perforations								Depth Casing Snoe			
- 1	(11014110110											
\vdash		D CEMENTING RECORD										
	HOLE SIZE	CA	SING & TUBING	SIZE	D	EPTH SE	Τ	SACKS CEMENT				
									Post ID-3			
									9-6-85			
_			<u> </u>			<u> </u>			CMS	Op No	ame	
L			<u> </u>			ter recovery of t		- alload oil a	nd must be	count to or ex	ceed top allo	
	EST DATA AND REQUE	ST F	or Allo	OWABLE (Tex	et must be af e for this de	ter recovery of t psh or be for full	lotal votum 124 hours)	12 07 1000 011 0	na musi os			
	II, WELL Octo First New Cil Run To Ton		Date of 7			Producing Meti			, etc.)			
1	ength of Test		Tubing P	7038210		Cosing Pressu	:•		Choke Size	•		
İ									Ger VGE			
A	ctual Fred. During Test	•	Water-Bbis.			0.		Gas+MCF				
	AS WELL Street Fred. Teat-MCF/D		Lenath of	Taal		Bhis. Condens	cte/MMCF		Gravity of	Condensate		
^	Coloc. Pica. 1661-NCF/D											
-	exting kiethod (pitot, back pr.)	,	Tubing Fi	resewe (Shat-in)	Cosing Pressu	- fbut-	in)	Choke Size	1		
	•											
	ERTIFICATE OF COMPI	LIANO	E				OIL C	ONSERVA		MMISSION		
	}					AUG 25 1985						
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.						AFFROVEO						
						Original Signed By BY Les A. Claments						
						Committee Olasia II						
	$U \cap$	TITLE Supervisor District 11										
-	1//		This form is to be filed in compliance with RULE 1104.									
	TI)OL		If this is a request for allowable for a nawly drilled or despense well, this form must be accompanied by a tabulation of the deviation									
			teals taken on the well in accordance with MULE 111.									
	Sr. Adminis	All sections of this form must be filled out completely for allow able on new and recompleted wells.										
	, 4											
	July	<u>22,</u> (1)41	1985			well name of	number,	or transports	r, or other i	ouch change	or construct	
		•			[]	Separate		C-104 must	ne illed t	or each pool	i in multist.	
					•••							