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FILE 1-  
U.S.G.S.  
LAND OFFICE  
TRANSPORTER OIL 1  
GAS  
OPERATOR 2  
REGISTRATION OFFICE

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65  
**RECEIVED**  
DEC 11 1966

1. Producer  
ANADARKO PRODUCTION COMPANY  
Address  
P. O. Box 9317, FORT WORTH, TEXAS  
Reason(s) for filing (check proper box)  
New Well ☐ Change in Transporter of: Oil ☐ Dry Gas ☐  
Recompletion ☐ Casinghead Gas ☐ Condensate ☐  
Change in Ownership ☒  
If change of ownership give name and address of previous owner  
WESTERN OILFIELDS, INC., P. O. Box 1137, HOBBS, NEW MEXICO

II. DESCRIPTION OF WELL AND LEASE  
Location  
CRITER-FEDERAL  
Well No. Pool Name, Including Formation  
12 SQUARE LAKE GRAYBURG S.A.  
Kind of Lease  
State, Federal or Fee FEDERAL  
Unit Letter J 1980 Feet From The S Line and 1980 Feet From The E  
Line of Section 30 Township 16S Range 31E NMPM, EDDY County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  
Name of Authorized Transporter of Oil ☒ or Condensate ☐  
CONTINENTAL  
Address (Give address to which approved copy of this form is to be sent)  
P. O. Box 367, ARTESIA, NEW MEXICO  
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐  
Address (Give address to which approved copy of this form is to be sent)  
If well produces oil or liquids, give location of tanks.  
Unit Sec. Twp. Rge. Is gas actually connected? When  
1F 30 16 3 No

IV. COMPLETION DATA  
Designate Type of Completion - (X)  
Date Spudded Date Compl. Ready to Prod. Total Depth P.B.T.D.  
Pool Name of Producing Formation Top Oil/Gas Pay Tubing Depth  
Perforations Depth Casing Shoe  
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT

V. TEST DATA AND REQUEST FOR ALLOWABLE  
OIL WELL  
Date First New Oil Run To Tanks 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 prod.) Tubing Pressure Casing Pressure Choke Size

VI. CERTIFICATE OF COMPLIANCE  
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.  
Signature  
Prod. Records Super  
12-14-66  
OIL CONSERVATION COMMISSION  
APPROVED DEC 29 1966  
BY W. A. Grissett  
TITLE OIL AND GAS INSPECTOR  
This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for wells on new and recompleted wells.  
Fill out Sections I, II, III, and VI only for changes of ownership, well name or number, or transporter, or other such change of conditions.  
Separate Forms C-104 must be filed for each pool in multi-completed wells.