F	DISTRIBUTION				SERVATION CC	SION	Form C-104			
	SANTA FE		REQU				Supersedes Old Effective 1-1-6	d (144 and (11 .5		
┟	U.S.G.S. AUTHORIZATION TO TRANSPECTION NATUR					NATURAL GA	S			
ł	LAND OFFICE				RECEIVED			4		
T	TRANSPORTER OIL /									
	GAS / FF				<u>5 B 5 1980</u>					
	OPERATOR /									
1.	PRORATION OFFICE							·		
	Anadarko Production Company ARTESIA, OFFICE									
Ì	Address ·									
	P. O. Box 67, Loco Hill	P. O. Box 67, Loco Hills, New Mexico 88255 Reason(s) for filing (Check proper box) Other (Please explain)								
	Change to be effective 3-1-80.									
	Because International State St						- Navajo Ref Pipeline D			
	Change in Ownership	Casinghead		Condenso			riperine b			
	If change of ownership give name		•*		•					
	and address of previous owner		*****			<u> </u>				
11.	ESCRIPTION OF WELL AND LEASE Well No.; Pool Name, Including Formation Kind of Lease									
	Lease Name	ase Name Well No. Pool Name, including For								
	Western Development "A"	State 1	ydurg SA		G-1 306					
	_ocation 									
	Unit Letter; 000	Unit Letter P ; 660 Feet From The South Line			- <u></u>					
	Line of Section 32 Township 16S Range 31E , NMPM, Eddy						dy			
III.	DESIGNATION OF TRANSPORT	SIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS				s to which approv	ed copy of this form is	1		
	Basin, Inc.				511 W.Ohio, P	.0.Box 229	7, Midland, Te	exas 79701		
	Name of Authorized Transporter of Cas	inghead Gas	or Dry Gas				ed copy of this form is	1 · · · ·		
	Phillips Petroleum Com	pany			P. O. Box 666			_		
	If well produces oil or liquids,	Unit Sec. P 32			Yes	1	1-1-62			
	give location of tanks.					ter number:		-		
IV	If this production is commingled wit. COMPLETION DATA	h that from sny						·		
•••	Designate Type of Completion - (X)							est in the first		
			l andu to Bred		Total Depth	1	P.B.T.D.			
	Date Spudded	Date Compl. R	egay to Ptoa.							
	Elevations (DF, RKB, RT, CR, etc.) Name of Producing Formation				Top Oil/Gas Pay		Tubing Depth			
		×			·					
	Perforations	Perforations					Depth Casing Shee			
		CEMENTING REC	ORD							
	HOLE SIZE		& TUBING SI		DEPTH		SACKS C	EMENT		
							· · · · · · · · · · · · · · · · · · ·			
						<u></u>				
		<u> </u>				<u> </u>				
N TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total valume of load oil and								 		
V	OIL WELL	able for this depth					h or be for full 24 hours) Producing Method (Flow, pump, gas lift, etc.)			
	Date First New Oil Run To Tanks	Date of Test			Producing Method (I	'low, pump, gas li	ljt, etc.j	,		
	· .	Tubing Press			Casing Pressure		Choke Size 0.51	Fred		
	Length of Test	I UDING Frees	1		•		Po-I	Da-Set		
	Actual Prod. During Test	Oil-Bbis,			Water-Bble.	•	Gas-MCF	-2710		
					ļ	. <u></u>		D 9-8 51 -29 10 51 +1 10 51		
	بل							2		
	GAS WELL Actual Prod. Test-MCF/D	Length of Te			Bbis. Condensate/A	MCF	Gravity of Condens			
	Actual Prod. (Sec- MOL/ D		÷							
	Testing Method (pitot, back pr.)	Tubing Press	we (Shut-in))	Casing Pressure (S	(but-in)	Choke Size			
V	CERTIFICATE OF COMPLIANCE					ATION COMMISS	SION			
	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.				APPROVED 19					
						h a gresset				
					BYSUPERVISOR, DISTRICT II					
				TITLE	PERVISOR, DI					
	().	a con hon				This form is to be filed in compliance with RULE 1104				
	(Signature) Area Supervisor (Title)				If this is a request for allowable for a newly drilled un deeper well, this form must be accompanied by a tabulation of the deviation					
					tests taken on	well, this form must be accordance with RULE init tests taken on the well in accordance with RULE init All sections of this form must be filled out completery for all sole on new and recompleted wells. Fill out only Sections I, II, III, and VI for changes of own well name or number, or transporter, or other such change of condit				
					All section					
	January 18, 1980									
	(Date)			well name or n	umber, or transp	ollat ol olval Ricu C	ende of cutor			

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