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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

AUG 28 1981

Oil Conservation Commission
District Office

I. Operator
Anadarko Production Company
Address
P. O. Box 67, Loco Hills, New Mexico 88255
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain) **Change lease name**
CASINGHEAD GAS MUST NOT BE
FLARED AFTER 10-1-81
UNLESS AN EXCEPTION TO Rule 30.6
IS OBTAINED
Ex #2-561
If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Brinson St.	Well No. 4	Pool Name, Including Formation Grayburg-Jackson, Queen SA	Kind of Lease State, 10/1/81	Lease No. B-161-3
Location Unit Letter H ; 1650 Feet From The North Line and 990 Feet From The East Line of Section 36 Township 16S Range 31E , NMPM, Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Navajo Refining Company, Pipeline Division	Address (Give address to which approved copy of this form is to be sent) P. O. Box 159, Artesia, New Mexico 88210			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	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 H	Sec. 36	Twp. 16S	Rge. 31E
Is gas actually connected?		When		

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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res.	Full Res.
Date Spudded 5-6-81	Date Compl. Ready to Prod. 7-21-81	Total Depth 4028'		P.B.T.D. 4010'				
Elevations (DF, RKB, RT, GR, etc.) 4145' GL	Name of Producing Formation Grayburg		Top Oil/Gas Pay 3843'		Tubing Depth 3906'			
Perforations Grayburg Premier: 3843-44, 3861-66, 3872-82 & 3885					Depth Casing Shoe 4027'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
8-5/8"	24.0#		457' KB		350 Circ.			
5-1/2"	15.5#		4027' KB		750 + 1/2-inched to surf.			

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, allowable for this depth or be for full 24 hours)

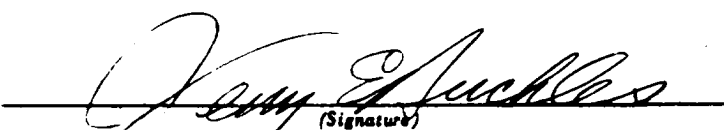
Date First New Oil Run To Tanks 7-21-81	Date of Test 8-17-81	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hours	Tubing Pressure 30#	Casing Pressure 30#	Choke Size None
Actual Prod. During Test 6	Oil-Bbls. 6	Water-Bbls. 0	Gas-MCF 19

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. 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)
Area Supervisor
(Title)
August 24, 1981
(Date)

OIL CONSERVATION COMMISSION
APPROVED **AUG 28 1981**
BY **W. A. Gressitt**
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 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 allowable 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.