		1	•					
	DISTRIBUTION		NEW MEXICO O	NL. COI		SSION	Form C -104	
	FILE	1	REQUE	Supersedes Old	Supersedge Old (-10e and (-110 Effective 1-1-65			
	U.S.G.S. 1	AUTI	AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS					2
					RECEIVED	_	US CONTRACTOR OF	
-	TRANSPORTER OIL GAS C							
1.	OPERATOR PROBATION OFFICE	CER 5 1980						
	Anadarko Production Company O. C. D.							
	Address P. O. Box 67, Loco Hills, New Mexico 88255							
	P. U. BOX 5/, LOCO H11 Reesen(s) for filling (Check proper box)		Other (Please					
	New Well					be effec	tive 3-1-80.	1
	Recompletion	Oil Cestor		ry Gas Iondense		ansporter	- Navajo Refi Pipeline Di	
	If change of ownership give name and address of previous owner		<u> </u>					
N. DESCRIPTION OF WELL AND LEASE								•
	Lease Name GB-SA Burnham/Unit Tract	Well N	o. Pool Name, Includi Square			Kind of Lease		• 180 j
			Square		e	siare, the fort		B-8146
	Unit Lotter <u>H</u> ; 660	)Feel F	rom The South	Line d	and <u>660</u>	_ Feet From Th	West	
	Line of Section 2 Ten	mehip	17S Range	)	30E , NMPM,		Eddy	
m.	DESIGNATION OF TRANSPORT Name of Authorized Transporter of Oil		Condensate	GAS	Adtrong /Gius address M	- milich annous	d annu at about	·
					Address (Give address to which approved copy of this form is to be sent			
	Name of Authorized Transporter of Casinghead Gas [2] or Dry Gas [3] Continental Oil Company				511 W. Ohio, P.O. Box 2297, Midland, Texas 79701 Address (Give address to which approved copy of this form is to texas P. O. Box 2197, Houston, Texas 77001			
	If well preduces oil or liquide,	Unit S	ec. Twp. Ree	), I	a gas actually connected	d? When		· .
		L		30E	Yes	l	July, 1962	<u> </u>
IV.	If this production is commingled wit COMPLETION DATA	h that from			ve commingling order			_
	Designate Type of Completio	a - (X)	Oll Well , Gga We	еШ ТК 	Yew Well Workover	Deepen	Plug Back Same Pes	t frestv
	Date Spudded	Date Compl	. Ready to Prod.		Tetal Depth		P.B.T.D.	1
	Elevations (DF, RKB, RT, GR, etc.)	Name of Pro	oducing Formation		Top Oil/Gas Pay		Tubing Depth	
	Perferetions	Ň						
		·					Depth Casing Shoe	
TUBING, CASING, AND CEMENTING RECORD								,
	HOLE SIZE	CABI	NG & TUBING SIZE		DEPTH SE	T	SACKS CEM	ENT OL
							Posto 3 q 8	The BI
¥.	TEST DATA AND REQUEST FO	B ALLOW	ABLE (Test must	be afte	r recovery of sotal volum	ne of load oil a	d must be sevel to or	· · · · · · · · · · · · · · · · · · ·
	OIL WELL, Date First New Oil Run Te Tanks	Date of Tes	adia jor sh	le depti	h or be for full 24 houre) Producing Method (Flow,	)		
	· · ·			'	Logacing Meruod (1.108)	, <b>pamp, gas</b> cijt,		1
	Longth of Toot	Tubing Pro	f f	6	Casing Pressure		Choke Size	
	Actual Pred. During Test	Oll-Bbis.	· · · · · · · · · · · · · · · · · · ·	{v	Water - Bbls.		Gas - MCF	••••••••••••••••••••••••••••••••••••••
1							·····	·
	GAS WELL Actual Pred. Test-MCF/D	Longth of T	'est	1	Bbls. Condensate/hBACF	· · · · · ·	Gravity of Condensate	
	Teeting Method (pitot, back pr.)	Tubing Brei	sure ( Shut-1a )		Casing Pressure ( Shut-	4-1		· ·
				`			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.				OIL CONSERVATION COMMISSION			
					APPROVED	resset	19	
					TITLE			
					-	1104		
					This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or despended 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 allow- able on new and recompleted wells. Fill out only Sections I. II. III, and VI for changes of owner, well name or number, or transporten or other such change of condition.			