	DISTINUUTION SANTA FE FILE U.S.G.S. LAND OFFICE IMANSPORTER GAS OPECATOR PROFATION OFFICE Operator Anadarko Petroleum Address P. O. Box 2497 Reason(s) for filing (Check proper box) Now Well	REQUEST AUTHORIZATION TO TRA Corporation Midland, Texas 79702	ONSERVATION CC		
	Change in Ownership X Cazinghead Cas Condensate Aug 1 1865 [If change of ownership give name Anadarko Production Company, P.O. Box 2497, Midland, Texas 79702				
	and address of previous owner A	nadarko Production Compa	ny, P.O. Box 2497, Midlar	id. Texas /9/02	
I. -	DESCRIPTION OF WELL AND I Lease Name Federal "Q" Location Unit Letter C : 660	2 Square Lake Gri	bg.,San Andres State, Federal	cr Fee Federal CO29020-M	
	Line of Section 3 Tow	mship 17S Range	30E . NMPM.	Eddy County	
1.	Navajo Refining Company Name of Authorized Transporter of Cul Navajo Refining Company Name of Authorized Transporter of Cus None If well produces off or liquids,	y - Trans. & Supply linghead Gas or Dry Gas Unit Sec. Twp. P.ge.	Address (Give address to which approximately P.O. Box 159, Artesia, N. Address (Give address to which approximately approximately approximately)	M 88210 red copy of this form is to be sent)	
	give location of tanks.	E 3 17S 30E	No sive commingling order number:		
٧.	If this production is commingled wit COMPLETION DATA Designate Type of Completio	Oil Well Gas Well	New Well Workover Deepen Total Depth	Plug Back 'Same Res'r. 'Dill. Res'v.	
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top O!!/Gas Pay	Tuhing Depth	
				Depth Casing Shoo	
	Perforations				
			CEMENTING RECORD DEPTH SET	SACKS CEMENT	
	HOLE SIZE	CASING & TUBING SIZE	DE. 711 DE.	Pagt IP-3	
				9-6-85	
		!		Che Op Name	
U	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a	fier recovery of total volume of load oil	and must be equal to or exceed top allow	
٠.	OII, WELL Date First New Oil Run To Tanks	able for this de	pth or be for full 24 hours) [Producing Method (Flow, pump, gos li	(i, eic.)	
	Date First New Off Run 10 Tenes			Chcke Size	
	Length of Test	Tubing Pressure	Coxing Preseute	Chers 3174	
	Actual Pred. During Test	Otl-Bbls.	Water - Bbls.	Gua-MOF	
		<u> </u>			
	GAS HELL		<u> </u>		
	Actual Prod. Test-MCF/D	Length of Test	Bble. Condensate //MCF	Gravity of Condensate	
	Teating Method (pitot, back pr.)	Tubing Frees = (Shot-in)	Cosing Pressue (Shut-in)	Choke Sixe	
,.	CERTIFICATE OF COMPLIANO	l CE	OIL CONSERVA	ATION COMMISSION	
1.			APPROVED AUG 29 1985		
	I hereby certify that the rules and regulations of the Oil Conservation Commission have been compiled with and that the information given above is true, and complete to the best of my knowledge and belief.		Original Signed By		
			BY Les A. Clements Supervisor District II		
	- 45 Of Brandlo		This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or despensely, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.		
	Senior Administrative	Senior Administrative Specialist		Att sections of this form must be fulled out completely for alless	
	(Title)		able on new and recompleted walls. Fill out only Sections 1, 11, 111, and VI for changes of owns		
	July 22, 1985	ute)	Fill out only Sections 1, 11, 111, and such change of condition well name or number, or transporter, or other such change of condition well name or number, or transporter, or other such change of condition		