- (HO, OF COPIES RECEIVED					* 1.			
	DISTRIBUTION	NEW MEXIC					Form C	-104 edes Old C-104 and C-11	
	FILE REQUEST FOR ALLOWABLE						Effecti	ve 1-1-65	
	U.S.G.S.	AUTHORIZATION	ΤΟ Ϡ ϜΏ	ENVER IB	VIL AND	NATURAL	GAS		
	LAND OFFICE OIL		AUG	12 1985	;				
	TRANSPORTER GAS								
	PROPATION OFFICE				C. D.				
l.	Operator								
	Anadarko Petroleum C	orporation 🗸							
	P. O. Box 2497, Midl	and, Texas 79702			715 (P)				
	Reason(s) for filing (Check proper box) New We!!	Change in Transporter o	! :			seexplain) e in Owner	ship Effect	ive:	
	Recompletion	cii 🔲	Dry Gas	一一二		1110			
	Change in Ownership X	Casinghead Gas	Conden	sate					
	If change of ownership give name and address of previous owner	Anadarko Productio	n Comp	any, P.	0. Box	2497, Mi	dland, Texa	ns 79702	
I.	DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including Fo							lorFee Federal 029342A	
	Federal "X"	4 Fren Se	ven Riv	rers		State, Feder		029342A	
	Location M : 33	O Feet From The Sou	th_Line	and 99	0	Feet From	The West		
	17C Barne 30E NMPM, Eddy County								
	Line of Section 21 Tow	mship 1/8 H	unge	JOIL		· · · · · · · · · · · · · · · · · · ·	3		
I.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATU	RAL GA	S Address (C	ive addres	s to which appro	oved copy of this j	orm is to be sent)	
	Navaio Refining Compa	nv-Trans. & Supply		P. O. 1	3ox 159	, Artesia,	New Mexico	orm is to be sent)	
	Name of Authorized Transporter of Cas	inghead Gas X or Dry Ga	s					lesville, OK	
	Phillips Petroleum If well produces oil or liquids,	Unit Sec. Twp.	P.ge.	ls gas act	ally conne	cted? Wi	nen	74004	
	give location of tanks.	M 21 17S		<u> </u>	25	lor number:	NA Order PC :	527	
ν.	If this production is commingled wit COMPLETION DATA				Workove			ame Resty. Diff. Resty.	
• •	Designate Type of Completion	. 011 11011	as Well	New Well	i workove	l I	1 1	1 1	
	Date Spudded	Date Compl. Ready to Prod.		Total Dept	h		P.B.T.D.		
	Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation			Top Oil/Gas Pay		Tubing Depth			
	Lievations (D1, Mile, M7, ON, Citi)						Depth Casing Shoe		
	Perforations								
				CEMENTING RECORD DEPTH SET			SACI	SACKS CEMENT	
	HOLE SIZE	CASING & TUBING S	126					I ID-3	
							9-6	of Rame	
								<u></u>	
٧.	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test	must be af for this de	ier recovery	of total vo	lume of load oil	and must be equa	l to or exceed top allo	
	TEST DATA AND REQUEST FOR ALLOWABLE (able for this depth or be for full 24 hours) OII. WELL Date of Test Producing Method (Flow, pump, gas lift, etc.)								
				Casing P:	essure		Choke Size		
	Length of Test	Tubing Pressure					Gae-MCF		
	Actual Prod. During Test	Cil-Bbls.		Water - Bbi	4 .		000		
	GAS WELL	! Length of Test		Bble. Con	densate/Aff	(CF	Gravity of Con	densate	
	Actual Prod. Test-MCF/D				155	nt-1n1	Choke Size		
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Ì	Casing Pr	da) orusaa				
۲'	CERTIFICATE OF COMPLIAN	CE			OIL	CONSERV	ATION COMM	IISSION	
• •				AUG 26 1985 19					
	hereby certify that the rules and regulations of the Oil Connervation commission have been complied with and that the information given bove is true and complete to the best of my knowledge and belief.			BY Original Signed By Les A. Clements					
	above is true and complete to the	rest of my knowledge an		T1T1 E					
				TITLE Supervisor District II This form is to be filed in compliance with RULE 1104.					
	Joseph &	If this is a request for allowable for a newly office of despendent							
	Senior Administrative Specialist (Title)				well, this form must be accordance with BULE 111. tests taken on the well in accordance with BULE 111. All sections of this form must be filled out completely for allowable on new and recompleted wells.				
	July 24	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 Separate Forms C-104 must be filed for each pool in multiply conditied wells.							
	(1)								