

DISTRIBUTION			
SANTA FE		1	
FILE		1	
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL	1	
	GAS	1	
OPERATOR		1	
PRORATION OFFICE			

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS
RECEIVED

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

FEB 5 1980

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 to be effective 3-1-80.
Former Transporter - Navajo Refining Co.
Pipeline Division

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Federal S	Well No. 1	Pool Name, including Formation Grayburg Jackson Queen-Gr	Kind of Lease 1/2ld, Federal 6/16d	LC 028936c
Location Unit Letter C ; 660 Feet From The North Line and 1980 Feet From The West Line of Section 28 Township 17S Range 30E , NMPM, Eddy				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Basin, Inc.	Address (Give address to which approved copy of this form is to be sent.) 511 W. Ohio, P.O. Box 2297, Midland, Texas 79701			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum Company	Address (Give address to which approved copy of this form is to be sent.) P. O. Box 6666, Odessa, Texas 79760			
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 28	Twp. 17S	Range 30E
				Is gas actually connected? Yes
				When 3-20-76

If this production is commingled with that from any other lease or pool, give commingling order number: PC 526 4-23-76

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res.
Date Spudded	Date Compl. Ready to Prod.	Total Depth			P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay			Tubing Depth			
Perforations					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
					posted 3-29-80 BI			
					2-29-80			

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

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	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.

Jerry E. Auchles
(Signature)
Area Supervisor
(Title)
January 18, 1980
(Date)

OIL CONSERVATION COMMISSION

APPROVED FEB 25 1980, 19
BY W. A. Gressett
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.

