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U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRODUCTION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
RECEIVED BY AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS  
AUG 12 1985  
O. C. D.  
ARTESIA, OFFICE

Form C-104  
Supersedes Old C-104 and C-11  
Effective 1-1-65

I. Operator  
Anadarko Petroleum Corporation  
Address  
P. O. Box 2497 Midland, Texas 79702  
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 in Ownership Effective:  
AUG 1 1985

If change of ownership give name and address of previous owner  
Anadarko Production Company, P. O. Box 2497, Midland, Texas 79702

II. DESCRIPTION OF WELL AND LEASE  
Lease Name  
Loco Hills "A" Federal  
Well No.  
8  
Pool Name, Including Formation  
Grayburg Jackson Queen, SA  
Kind of Lease  
State, Federal or Fee Federal  
Lease No.  
NM074935  
Location  
Unit Letter E : 1980 Feet From The North Line and 660 Feet From The West  
Line of Section 15 Township 17S Range 30E, NMPM, Eddy County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  
Name of Authorized Transporter of Oil ☒ or Condensate ☐  
Navajo Refining Company - Trans. & Supply  
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 ☒ or Dry Gas ☐  
Phillips Petroleum  
Address (Give address to which approved copy of this form is to be sent)  
10 W.W. Frank Phillips Bldg., Bartlesville, Okla  
If well produces oil or liquids, give location of tanks.  
Unit M Sec. 10 Twp. 17S Rge. 30E  
Is gas actually connected? Yes When May, 1972  
74004

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)  
Date Spudded  
Date Compl. Ready to Prod.  
Total Depth  
P.B.T.D.  
Elevations (DF, RKB, RT, CR, 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  
Best JD-3  
9-6-85  
Chg. of name

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 top 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/MMCF  
Gravity of Condensate  
Testing Method (pitot, 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.  
Senior Administrative Specialist  
1/25/85  
OIL CONSERVATION COMMISSION  
APPROVED  
AUG 29 1985  
Original Signed By  
Les A. Clements  
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.  
Separate Forms C-104 must be filed for each pool in multiply recompleted wells.