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NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS  
JUL 17 1972

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

O. C. C.  
ARTESIA, OFFICE

I. OPERATOR

Operator Anadarko Production Company

Address P. O. Box 67, Loco Hills, New Mexico 88255

Reason(s) for filing (Check proper box)

New Well	<input checked="" type="checkbox"/>	Change in Transporter of:		Other (Please explain)
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>	CASINGHEAD GAS MUST NOT BE FLARED AFTER <u>9-4-72</u> UNLESS AN EXCEPTION TO R-4070 IS OBTAINED
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>	

Dry Gas ☐ Condensate ☐

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>6</u>	Well No. <u>5-8</u>	Pool Name, Including Formation <u>Grayburg Jackson</u>	Kind of Lease <u>State, Federal XXXX</u>	Lease No. <u>LC-029342(b)</u>
Location				
Unit Letter <u>J</u>	<u>1980</u> Feet From The <u>South</u> Line and <u>1980</u> Feet From The <u>East</u>			
Line of Section <u>9</u>	Township <u>17-S</u>	Range <u>30-E</u>	NMPM, <u>Eddy</u> County	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
<u>Navajo Refining Co., Pipeline Division</u>	<u>P. O. Box 67, Artesia, New Mexico 88210</u>	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
<u>Phillips Petroleum Company</u>	<u>4th and Washington, Odessa, Texas</u>	
If well produces oil or liquids, give location of tanks.	Unit <u>P</u>	Sec. <u>9</u>
	Twp. <u>17-S</u>	Rge. <u>30-E</u>
	Is gas actually connected? <u>No</u> When <u>8-4-72</u>	

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)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded <u>6-19-72</u>	Date Compl. Ready to Prod. <u>7-2-72</u>	Total Depth <u>2869'</u>	P.B.T.D. <u>2864'</u>					
Elevations (DF, RKB, RT, GR, etc.) <u>3685' GL</u>	Name of Producing Formation <u>Grayburg</u>	Top Oil/Gas Pay <u>2610'</u>	Tubing Depth <u>2865'</u>					
Perforations <u>2610-14, 2620-24, 2632-38, 2722-36</u> <u>2748-50, 2763-68, 2791-95, 2832-46</u>	Depth Casing Shoe <u>2868</u>							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
<u>12 1/4"</u>	<u>8 5/8"</u>	<u>489'</u>	<u>150 sacks</u>					
<u>7 7/8"</u>	<u>5 1/2"</u>	<u>2868'</u>	<u>450 sacks</u>					
	<u>2 3/8"</u>	<u>2855</u>						

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 allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks <u>7-4-72</u>	Date of Test <u>7-12-72</u>	Producing Method (Flow, pump, gas lift, etc.) <u>Pump</u>	
Length of Test <u>24 hours</u>	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls. <u>126</u>	Water - Bbls. <u>15 (Load)</u>	Gas - MCF <u>270</u>

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

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.

R. L. Lipton  
(Signature)

Area Supervisor

(Title)

OIL CONSERVATION COMMISSION

APPROVED JUL 18 1972  
BY W. G. Gressett  
TITLE OIL AND GAS INSPECTOR

This form is to be filed in compliance with RULE 111.  
If this is a request for allowable for a newly drilled well, this form must be accompanied by a tabulation of the tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely.