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NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

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

- 1	FILE		AND			
ſ	U.S.G.S.	AUTHORIZATION TO TRAN	ISPORT OIL AND NATI	JRAL GAS		
1	LAND OFFICE					
1	OIL	RECE	IVED			
	TRANSPORTER GAS I	RELLE	, • = -			
}			•			
- 1	OPERATOR		1072			
1.	PRORATION OFFICE	JAN 29	13/3			
	perator					
	Anadarko Production Company G. C. C.					
1	Address DEFIGE					
	D. C. David G. Taga Halla New Moving 88255					
	P. O. Box 67. Toco Hills, New Mexico 88255 Ceason(s) for filing (Check proper box) Other (Please explain)					
- 1		Change in Transporter of:			j	
1	New Well	Oil Dry Gas			- 1	
	Recompletion					
	Change in Ow ership	Casinghead Gas Condens	die			
	If change of ownership give name and address of previous owner					
	and address of previous owner					
**	DESCRIPTION OF WELL AND L	FASE				
11.	Lease Name Q	Well No. Pool Name, Including For	mation Kine	of Lease N	10.	
	\mathcal{Q}	d a comparison To	elegen Sex	K Federal XXXX LCD29342	(b)	
	Loco Hills Federal B	8-9 Grayburg Jac	GRSOII			
	Location					
	Unit Letter K : 198	30 Feet From The South Line	and 1980 F	eet From The West		
				_,,		
	Line of Section 9 Tow	nship 17-S Range	30-E , NMPM,	Fddy Coun	τy	
	DESIGNATION OF TRANSPORT	FROM OU AND NATURAL GAS				
111.	DESIGNATION OF TRANSPORT	or Condensate	Address (Give address to wh	ich approved copy of this form is to be sent)		
	Name of Authorized Aut					
	Navajo Refining Co	Pipeline Division	P. O. Box 5/ Ar	ich approved copy of this form is to be sent)		
	Name of Authorized Transporter of Cashighed des M					
	Phillips Petroleum Corporation 4th & Washington, Odessa, Texas					
		Unit Sec. Twp. P.ge.	Is gas actually connected?	· · · · · · · · · · · · · · · · · · ·		
	If well produces oil or liquids, give location of tanks.	P 9 17-S 30-E	yes	1-15-73		
	If this production is commingled with that from any other lease or pool, give commingling order number:					
		h that from any other lease or pool,	The committee or a me.			
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover D	eepen Plug Back Same Res'v. Diff. Ro	es'v.	
	Designate Type of Completio	p = (X)	i i i	×		
	Designate Type of Completion		XX Total Depth	P.B.T.D.		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth		1	
	7–10–72	7-28-72	28691	2856°		
	Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth		
		Garanelas ma	251.1.1	2850		
	3684 GI. Grayburg 2544* Depth Casing Shoe Perforations 2544-48*, 2596-2602*, 2612-16*, 2622-30*, 2674-82* 2850* 2850* 2850* 2867*					
	Perforations 2544-48, 2596-2602, 2612-16, 2022-30, 2014-62.					
	2720-281, 2822-301 TUBING, CASING, AND CEMENTING RECORD					
			DEPTH SET	SACKS CEMENT		
	HOLE SIZE	CASING & TUBING SIZE				
	12 1///	8 5/8"	4891			
	7 7/8"	5 1/20	28671	450		
	7 7/8"					
		2 '.	2850 1/2	(3173-		
		<u> </u>		, ,, ,,,,	allow.	
V	TEST DATA AND REQUEST FOR ALLOWABLE (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)					
•	OH WELL		Producing Method (Flow, pr	imp, gas lift, etc.)		
	Date First New Oil Run To Tanks	Date of Test	producing Method (1 100), p.			
	1-15-73	122-73	Pump	Choke Size	(-)	
	Length of Test	Tubing Pressure	Casing Pressure	Choco Size		
	I .					
	24 hours Actual Prod. During Test	Oil-Bhis.	Water-Bbis.	Gas-MCF	V	
	Actual Prod. During 1001		10 (Load)	27		
	20 10 (Toad)					
	GAS WELL		Date Condenses Anice	Gravity of Condensate		
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF			
				Choke Size	 i	
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in	Choke Size		
	. surring tile tile til				لـــــــا	
			01 00	NSERVATION COMMISSION		
V	. CERTIFICATE OF COMPLIAN	CE	11			
			APPROVED JAN 3 1 1973 . 19			
	I hereby certify that the rules and	by certify that the rules and regulations of the Oil Conservation		APPROVED		
	above is true and complete to th	e best of my knowledge and belief.				
		1	TITLE OIL AND	U GAS INSTELLION		
	سلمرسم أمم		11	ere a la magnatisma a mish mari m esta		
	Olifor Control		This form is to be	filed in compliance with RULE 1104.		
			Page 19 and 19 a			
	(Sier	(Signature)		If this is a request for allowable for a newly diffice of deviation well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.		
	toots taken on the well in accordance			to form must be filled out completely for i	allow-	
	A r ea Sujerv	iso r	All sections of th	le lorm must be imied out completely to.		
	/7	1147)				