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

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

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AUG 31 1972

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:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other CASINGHEAD GAS MUST NOT BE FLARED AFTER 10-5-72 UNLESS AN EXCEPTION TO R-4070 IS OBTAINED	

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Loco Hills B Federal	Well No. 8-7	Pool Name, Including Formation Seven Rivers Undesignated	Kind of Lease XXX Federal XXX	Lease No. 16-029342 (b)
Location				
Unit Letter K	1980	Feet From The South	Line and 1980	Feet From The West
Line of Section 9	Township 17-S	Range 30-E	, NMPM, Eddy 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)					
Navajo Refining Co., Pipeline Division	P. O. Box 67, Artesia, New Mexico 88210					
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)					
Phillips Petroleum Corporation	4th and Washington, Odessa, Texas					
If well produces oil or liquids, give location of tanks.	Unit K	Sec. 9	Twp. 17-S	Rge. 30-E	Is gas actually connected? No	When

If this production is commingled with that from any other lease or pool, give commingling order number: **Application Pending**

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 7-10-72	Date Compl. Ready to Prod. 7-28-72		Total Depth 2869'		P.B.T.D. 2000'			
Elevations (DF, RKB, RT, GR, etc.) 3684' GL	Name of Producing Formation Seven Rivers		Top Oil/Gas Pay 1883'		Tubing Depth 1940'			
Perforations 1883-1885, 1894-1900					Depth Casing Shoe 2867'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4"	8 5/8"		489'		150			
7 7/8"	5 1/2"		2867'		450			
		2 3/4"	1980					

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 8-5-72	Date of Test 8-28-72	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 Hours	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls. 26	Water - Bbls. 4 (Load)	Gas - MCF 35

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.

Original Signed By

D. R. Layton

(Signature)

Area Supervisor

(Title)

OIL CONSERVATION COMMISSION

AUG 31 1972

APPROVED **J. A. Gressett**, 19

BY **J. A. Gressett**

TITLE **OIL AND GAS INSPECTOR**

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 allow-