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

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-105  
Effective 1-1-65

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AUG 16 1973

Operator ANADARKO PRODUCTION COMPANY <b>N.C.C.</b>	
Address TWO GREENWAY PLAZA EAST, SUITE 410, HOUSTON, TEXAS 77046 <b>ARTESIA OFFICE</b>	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	Placed in Unit effective July 1, 1973 - former lease name was: Banner Miller
Recompletion <input type="checkbox"/>	
Change in Ownership <input checked="" type="checkbox"/>	
Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	

If change of ownership give name and address of previous owner: Depco, Inc., 1036 Petroleum Club Bldg., Denver, Colorado 80502

II. DESCRIPTION OF WELL AND LEASE

Lease Name Ballard G-SA Ut. Tr. 8	Well No. 4	Pool Name, including Formation Loco Hills Q GSA	Kind of Lease State, Federal or Foreign NM	Lease No. 9011
Location Unit Letter <b>B</b> ; <b>660</b> Feet From The <b>North</b> Line and <b>1980</b> Feet From The <b>East</b> Line of Section <b>5</b> Township <b>18S</b> Range <b>29E</b> , NMPM, <b>Eddy</b> 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"/> Texas-New Mexico Pipe Line	Address (Give address to which approved copy of this form is to be sent) Box 1510, Midland, Texas 79701	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum Corp.	Address (Give address to which approved copy of this form is to be sent) Box 6665, Odessa, Texas 79760	
If well produces oil or liquids, give location of tanks.	Unit <b>C</b>	Sec. <b>5</b>
	Twp. <b>18</b>	Rge. <b>29</b>
	Is gas actually connected? <b>Yes</b> When	

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'tv.	Diff. Res'tv.
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			

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)

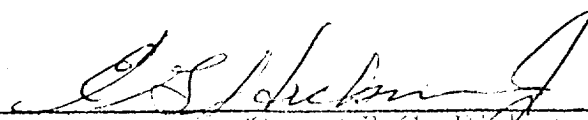
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (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.

  
(Signature) E.G. Hickman, Jr.  
Administrative Specialist  
(Title)  
8/8/73  
(Date)

OIL CONSERVATION COMMISSION

APPROVED **AUG 24 1973**, 19\_\_\_\_\_  
BY **W. 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 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