DISTITUTION SANTA FE FILE U.S.G.S. LAND OFFICE IRANSPORTER OIL V GAS V OPERATOR PROFATION OFFICE Uperator Anadarko Petroleum Address P. O. Box 2497 Mi Recompletion Change in Ownership X	AUTHORIZATION TO TR RECUEST AUTHORIZATION TO TR RECUEST AUG 12 O. C. ARTESIA Change in Transporter of: Cit Dry C	Other (Picase explain) Change in Owner	Form C-104 Superseder Old C-104 and C-11 Ellocute 1-1-65 GAS Tship Effective: UG 1 1985
If change of ownership give name and address of previous owner_	Anadarka Uraduatian Lan	npany, P. O. Box 2497, Mi	dland, Texas 79702
Ballard GSAU Tract 23 Location Unit Letter N	Zell No. Pool Name, Inc. Caling	og., San Andres State, Feder	al cr Fee Fee -
Line of Section 5	Township 18S Ronge	29Е , ммрм.	Eddy County
Nome of Authorized Transporter of Texas-New Mexico Pipe	eline Company Casingnead Gas XX or Dry Gas	P.O. Box 60028, San Ang	elo, TX 76906
If well produces oil or liquids, give location of tanks.	L 5 18S 29F	Yes	July 1964
If this production is commingled COMPLETION DATA	with that from any other lease or pool,	, give commingling order number: New Well Workover Deepen	Plug Back Same Res'r. Diff. Res'v.
Designate Type of Comple			
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Elevations (DF, RKB, RT, GR, etc	.; Name of Producing Formation	Top Oll/Gas Pay	Tubing Depth
Periorations		<u> </u>	Depth Casing Shoe
TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
			9-6-85
			Op. name che.
. TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be a	after recovery of total volume of load oil epth or be for full 24 hours)	and must be equal to or exceed top allow-
Oll, WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas li	ifi, etc.)
Length of Test	Tubing Pressue	Cosing Pressure	Choke Size
	Cil-Bbis.	Water-Bbls.	Goa-MCF
Actual Pred. During Test	Cir-bu.s.		1
GAS WELL Actual Fical Test-MOF/D	Length of Test	Ebia, Concensore/MMCF	Growity of Condensate
Teating krethod (pitot, back pr.)	Tuting Frees we (Shut-in)	Cosing Fressure (Shut-in)	Choke Sixe
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.		OIL CONSERVATION COMMISSION AUG 26 1985. Original Signed By BY Les A. Clements Supervisor District !! This form is to be filed in compliance with RULE 1104.	
Sr. Administrative Specialist (Title) (Pare)		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. Secrete Forms C-104 must be filled for each pool in multiply.	