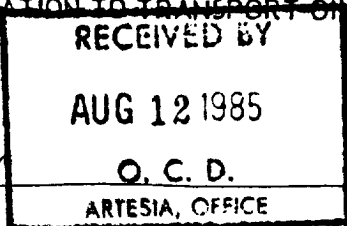


DISTRIBUTION			
SANTA FE		<input checked="" type="checkbox"/>	
FILE		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL	<input checked="" type="checkbox"/>	
	GAS	<input checked="" type="checkbox"/>	
OPERATOR		<input checked="" type="checkbox"/>	
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-1  
Effective 1-1-65



1.

Operator  
Anadarko Petroleum Corporation

Address  
P. O. Box 2497 Midland, Texas 79702

Reason(s) for filing (Check proper box)

New Well ☐  
Recompletion ☐  
Change in Ownership ☒

Change in Transporter of:  
Oil ☐  
Casinghead Gas ☐  
Dry Gas ☐  
Condensate ☐

Other (Please explain)

Change in Ownership Effective:

AUG 1 1985

If change of ownership give name  
and address of previous owner:

Anadarko Production Company, P. O. Box 2497, Midland, Texas 79702

II. DESCRIPTION OF WELL AND LEASE

Lease Name Ballard GSAU Tract 15	Well No. 5	Pool Name, Including Formation Loco Hills Grbg., San Andres	Kind of Lease State, Federal or Fee Federal	Lease No. LC 061702
Location: Unit Letter E : 1750 Feet From The North Line and 990 Feet From The West Line of Section 8 Township 18S Range 29E, 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"/> Texas-New Mexico Pipeline Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 60028, San Angelo, TX 76906					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum	Address (Give address to which approved copy of this form is to be sent) 10 W.W. Frank Phillips Bldg., Bartlesville, OK 74004					
If well produces oil or liquids, give location of tanks.	Unit F	Sec. 8	Twp. 18S	Rge. 29E	Is gas actually connected? Yes	When NA

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, GR, 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 (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.

  
(Signature)

Sr. Administrative Specialist

(Title)

JUL 22 1985

(Date)

OIL CONSERVATION COMMISSION

APPROVED AUG 26 1985, 19

BY Original Signed By  
Les A. Clements

TITLE Supervisor District II

This form is to be filled 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 filled for each pool in multiply