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	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

FEB 19 1973

Operator Anadarko Production Company	
Address Box 67 Loco Hills, New Mexico 88255	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	<i>Converted from Injection to Producer</i>
Recompletion <input checked="" type="checkbox"/>	
Change in Ownership <input 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

II. DESCRIPTION OF WELL AND LEASE

Lease Name Tract 8 Far West Loco Hills Sd.Ut.	Well No. 31	Pool Name, including Formation Loco Hills Gbg.-SA	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Unit Letter K 2310 Feet From The South Line and 1980 Feet From The West Line of Section 4 Township 18 S Range 29 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"/> Texas-New Mexico Pipeline Co.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1510 Midland, Texas
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit N Sec. 9 Twp. 18S Rge. 29E Is gas actually connected? No 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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover <input checked="" type="checkbox"/>	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 6-12-70	Date Compl. Ready to Prod. 6-30-70	Total Depth 3133	P.B.T.D. 2552					
Elevations (DF, RKB, RT, GR, etc.) 3531 GL	Name of Producing Formation Grayburg	Top Oil/Gas Pay 2485	Tubing Depth 2502					
Perforations 2485-2502	Depth Casing Shoe 2552							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE 12 1/4	CASING & TUBING SIZE 8 5/8		DEPTH SET 388		SACKS CEMENT 150			
7 7/8	5 1/2		2552		250			

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 2-10-73	Date of Test 2-12-73	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hrs.	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls. 6	Water - Bbls. 1	Gas - MCF 3

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

Area Supervisor

(Signature)

(Title)

OIL CONSERVATION COMMISSION

APPROVED **FEB 20 1973**, 19

BY **W. R. 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-