NO. OF COPIES RECEIVED					
DISTRIBUTION SANTA FE	NEW MEXICO OIL CONSERVATION COMA ION REQUEST FOR ALLOWABLE		Signarades Did Calbs and Q-11		
FILE VV	AND		Effective 1-1-65		
U.S.G.S.	AUTHORIZATION TO TRANSPORT OIL AND NATURAL		<b>A5 FEB 29</b> 1984		
LAND OFFICE	-				
TRANSPORTER OIL V GAS	- -		O. C. D. ARTESIA, OFFICE		
OPERATOR V	- ·				
PRORATION OFFICE		· · · · · · · · · · · · · · · · · · ·			
Anadarko Production Com	npany				
Address P. O. Drawer 130, Artes	sia, New Mexico 88210				
Reason(s) for filing (Check proper box	·	Other (Please explain)			
New Well	Change in Transporter of:		merly J. L. Langford #7;		
Change in Ownership	Oil Dry Gas Casinghead Gas Condens		s well as part of FWLHSU		
If change of ownership give name and address of previous owner					
DESCRIPTION OF WELL AND	LEASE		· ·		
Lease Name	Well No.   Pool Name, Including Fo				
Far West Loco Hills Sar Unit Tract No Location	d 9 32 Loco Hills-Quee	en-Grayburg-SA	Vgt/Fee FEE		
	OFeet From TheNorthLine	and <u>1650</u> Feet From T	The West		
0	wnship 18S Range	·	Eddy County		
DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	<u> </u>			
Name of Authorized Transporter of Oil Condensate					
Texas-New Mexico Pipe Line Company P. O. Box 1510, Midland, Texas 79701   Name of Authorized Transporter of Casinghead Gas or Dry Gas   Address (Give address to which approved copy of this form is to be set)			<u>Texas 19701</u> ved copy of this form is to be sent)		
None					
If well produces oil or liquids,	Unit Sec. Twp. Rge,	Is gas actually connected? Whe	en		
give location of tanks.	<u>N</u> 9 185 29E	No			
If this production is commingled window COMPLETION DATA	Ith that from any other lease or pool,		Plug Back 'Same Res'v.' Diff. Res'v		
Designate Type of Completi	on - (X)	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v		
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth		
Elevations (DF, RKB, RT, GR, etc.)	Name of Froducing Formation				
Perforations			Depth Casing Shoe		
	TUBING, CASING, AND	CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
TEST DATA AND REQUEST F	COR ALLOWABLE (Test must be a	fter recovery of total volume of load oil	and must be equal to or exceed top alle		
OIL WELL	able for this de	pth or be for full 24 hours) Producing Method (Flow, pump, gas li			
Date First New Oil Run To Tanks	Date of Test	Producing Method (r tow, pump, gas a	is, ecc.) post. 2D-3		
Length of Test	Tubing Pressure	Casing Pressure	Choke Size 3-2-84 Choke Size		
Actual Prod. During Test	Oil-Bble.	Water-Bbls.	Gas - MCF		
[	· ·	<u></u>			
GAS WELL					
Actual Prod, Test-MCF/D	Length of Test	Bble. Condensate/MMCF	Gravity of Condensate		
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size		
CERTIFICATE OF COMPLIA		OIL CONSERVA	ATION COMMISSION		
I hereby cartify 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.		APPROVED MAR 0 1 1984			
				WDOAR 12 TLAR BUT Comhtafa fo ma nasr or mà whomsanda and passan	
.) •	. 7		compliance with RULE 1104.		
(Signature) Area Supervisor		This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepen well, this form must be accompanied by a tabulation of the deviau- tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for all able on new and recompleted wells. Fill out only Sections I. II. III, and VI for changes of own.			
				(Title) February 28, 1984	
				(Date)	