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U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION 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-110
Effective 1-1-65

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JUL 29 1975

I. Operator **Anadarko Production Company** ☒ **O. C. C.**
Address **P. O. Box 67, Loco Hills, New Mexico 88255** **ARTESIA, OFFICE**
Reason(s) for filing (Check proper box) Other (Please explain)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Ballard G-8A Ut.Tr.15	6	Loco Hills Q GSA	xxx Federal xxx	LC061602
Location				
Unit Letter	F	Feet From The	North	Line and
	1980		1980	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"/>	Address (Give address to which approved copy of this form is to be sent)	
Texas-New Mexico Pipe Line Company	Box 1510, Midland, Texas 79701	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Phillips Petroleum Corporation	Box 6666, Odessa, Texas 79760	
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	E	8
	18S	29E
	Is gas actually connected? Yes When 7-15-75	

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'v.	Diff. Res'v.
X	X							
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
4-1-75	7-15-75	3089'	3089'					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
3531' GR	Grayburg-Jackson	2454' Top Oil	2989'					
Perforations	Is gas actually connected? Yes When 7-15-75		Depth Casing Shoe					
2658-68, 2632-40, 2624-28, 2580-86, 2561-66, 2492-98			3089'					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/2"	8 5/8"		350'		150 sacks			
7 7/8"	4 1/2"		3100' 3089'		400 sacks			
	2 3/8"		2989'					

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.)	
7-16-75	7-24-75	Pumping	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hours	50#	50#	
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
15 B0	15	25 BLW	23

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.

Area Supervisor
(Signature)
(Title)

July 28, 1975

OIL CONSERVATION COMMISSION

AUG 4 1975

APPROVED _____, 19

BY **W. A. Gressett**

TITLE **SUPERVISOR DISTRICT II**

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.