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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

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APR 5 1977

I. Operator **Anadarko Production Company**
Address **P. O. Box 67, Loco Hills, New Mexico 88255**
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain) **CASINGHEAD GAS MUST NOT BE FLARED AFTER 6-1-77 UNLESS AN EXCEPTION TO RULE 306 IS OBTAINED**
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.
Artesia State Unit Tr. 9	5	Artesia	State	B10568
Location				
Unit Letter	A	1270 Feet From The North Line and 50 Feet From The East		
Line of Section	23	Township 18S Range 27E	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)	
Navajo Refining Co., Pipeline Div.	N. Freeman Ave., Artesia, New Mexico 88210	
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)	
None		
If well produces oil or liquids, give location of tanks.	Unit P	Sec. 14
	Twp. 18S	Rge. 27E
	Is gas actually connected?	When
	No	

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	Deepen	Plug Back	Same Res'tv.	Diff. Res'tv.
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
1-30-77	3-17-77	2040'	2038'					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
3561.2 GL	Grayburg	1822'	2015' SN					
Perforations	Loco Hills: 1822-42, Metex: 1904-08, 1916-20, 1947-51, 1959-65, 1976-80, 2002-12 & 2020-24 all @ 2 SPF		Depth Casing Shoe					
			2040'					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4"	8 5/8"		307' KB		150 + 4 yds Redimix			
7 7/8"	4 1/2"		2040' KB		700 sx (see C-103)			
	2 3/8"		2015					

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.)	
3-28-77	4-1-77	Pumping	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 Hours	20#	20#	None
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
47 bbls	10	37	TSTM

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
Jerry E. Buckles

(Signature)

Area Supervisor

(Title)

OIL CONSERVATION COMMISSION

APPROVED APR 8 1977

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 or non-completed wells.