

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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TRANSPORTER	OIL
	GAS
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I. Operator  
**Anadarko Production Company** ✓  
Address  
**P. O. Box 67, Loco Hills, New Mexico 88255**  
Reason(s) for filling (Check proper box)  
New Well ☒ Change in Transporter of:  
Recompletion ☐ Oil ☐ Dry Gas ☐  
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐  
Other (Please explain)  
If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE  
Lease Name **Ballard GSA Unit Tract 14** Well No. **6** Pool Name, including Formation **Loco Hills-Queen-Grayburg SA** Kind of Lease **State Federal** Lease No. **LC 061701**  
Location  
Unit Letter **M** : **870** Feet From The **South** Line and **660** 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 ☒ or Condensate ☐  
**Texas-New Mexico Pipeline Company** Address (Give address to which approved copy of this form is to be sent)  
**P. O. Box 1510, Midland, Texas 79701**  
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐  
**Phillips Petroleum Corporation** Address (Give address to which approved copy of this form is to be sent)  
**P. O. Box 6666, Odessa, Texas 79760**  
If well produces oil or liquids, give location of tanks. Unit **E** Sec. **8** Twp. **18S** Rge. **29E** Is gas actually connected? **Yes** When **6-24-81**

IV. COMPLETION DATA  
Designate Type of Completion - (X) Oil Well ☒ Gas Well ☐ New Well ☒ Workover ☐ Deepen ☐ Plug Back ☐ Same Res'v. ☐ Diff. Res'v. ☐  
Date Spudded **5-30-81** Date Compl. Ready to Prod. **6-24-81** Total Depth **2778'** P.B.T.D. **2723'**  
Elevations (DF, RKB, RT, GR, etc.) **3522' GL** Name of Producing Formation **Grayburg** Top Oil/Gas Pay **2407'** Tubing Depth  
Perforations **2407-2652** Depth Casing Shoe **2775' KB**  
TUBING, CASING, AND CEMENTING RECORD  
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT  
**12-1/4"** **8-5/8"** **377' KB** **300 ex Circulated**  
**7-7/8"** **5-1/2"** **2775' KB** **725 ex Circulated**

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 **6-26-81** Date of Test **7-3-81** Producing Method (Flow, pump, gas lift, etc.) **Presently Flowing - will POP later**  
Length of Test **24 hours** Tubing Pressure Casing Pressure **1000** Choke Size **22/64"**  
Actual Prod. During Test **318** Oil-Bbls. **124** Water-Bbls. **194** Gas-MCF **7.8**

GAS WELL  
Actual Prod. Test-MCF/D Length of Test Bbls. Condensate/MMCF Gravity of Condensate  
Testing Method (pilot, 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.  
**Area Supervisor**  
**July 9, 1981**  
(Date)

OIL CONSERVATION COMMISSION  
APPROVED **JUL 29 1981**  
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 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.