SANTA FE REQUEST FOR ALL AND AUTHORIZATION TO TRANSPORT					Form C-104 Supersedes Old C-104 and C-111 Ellective 1-1-65
LAND OFFICE IRANSPORTER OIL GAS OPERATOR PROFATION OFFICE		RECEI AUG 1			
Anadarko Petroleum Corporation AR			D. C. D. ESIA, OFFICE		
P. O. Box 2497 Midla Reason(s) for filing (Check proper box) New We!! Recompletion Change in Ownership X	Change in Transporter o	of: Dry Gas Conden:	· 🔲 ,		hip Effective:
If change of ownership give name and address of previous owner	Anadarko Productio	on Comp	any, P. O. Box	2497, Mid	land, Texas 79702
	7 Loco Hi	11s Grb	g., San Andres	Feet From T	į
Line of Section 8 Tow . DESIGNATION OF TRANSPORT		<u> </u>	<u> </u>		
Name of Authorized Transporter of Oil Texas-New Mexico Pipeli Name of Authorized Transporter of Cas Texaco Producing Inc.	ne Company		P.O. Box 6002	8, San Ang	ed copy of this form is to be sent) elo, TX 76906 ed copy of this form is to be sent) Bldg., Bartlesville, OK 74004
	Unit Sec. Twp.	29E	Yes	ı	Aug. 1981
If this production is commingled wit. COMPLETION DATA Designate Type of Completion	n - (X)	as Well	New Well Worzover		Plug Back Same Res'v. Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod. Name of Producing Formation		Top O11/Gas Pay		Tubing Depth
Periorations [DF, RKB, RT, GR, etc.] Name of Producing Formation					Depth Casing Snoo
TUBING, CASING, AND CEMENTING RECORD					
HOLE SIZE	CASING & TUBING	SIZE	DEPTH	SET	SACKS CEMENT
	•				
TEST DATA AND REQUEST FOR ALLOWABLE (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) Oil, WELL [Producing Method (From, pump, gas lift, etc.]					
Date First New Cil Run To Tanks	Date of Test		Cosing Pressure		Choke Size
Length of Test Actual Prod. During Test	CI1-Bb1.		Water - Bble.		Gos-MCF
GAS WELL Actual Frod. Teel-MCF/D	Length of Test		Bbls. Concensore/Add	o r	Gravity of Condensate
Testing kiethod (putot, back pr.)	Tubing Pressure (Shmt-im)	}	Costng Freesure (Shr	t-in)	Choke Size
. CERTIFICATE OF COMPLIANCE			OIL CONSERVATION COMMISSION AUG 26 1985		
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.			APPROVED Original Signed By Les A. Clements TITLE Supervisor District II		
Sr. Administrative Specialist			This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or despended well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111. All actions of this form must be filled out completely for allow-		
(Title) (Pare)			well name or number, or transporter, or other each pool in multisty		