

OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED BY

SEP 23 1983

O. C. D.
ARTESIA, OFFICE

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Anadarko Production Company

P. O. Drawer 130, Artesia, New Mexico 88210

Reason(s) for filing (Check proper box)

Well ☐
Completion ☐
Change in Ownership ☐

Change in Transporter of:
Oil ☒
Casinghead Gas ☐

Dry Gas ☐
Condensate ☐

Other (Please explain)

Change Transporter: Effective 10-1-83
Former Transporter: The Permian Corp.

Change of ownership give name
address of previous owner

DESCRIPTION OF WELL AND LEASE

Well Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Travis "D" Federal	20	Loco Hills-Queen-Grayburg-SA	State Federal	NM-54183

Unit Letter H : 1980 Feet From The North Line and 330 Feet From The East
Line of Section 18 Township 18S Range 29E , NMPM, Eddy County

SIGNATION 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)
J M Petroleum Corporation	2000N. Tower Plaza of the Americas, Dallas, Tx 75201
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 Corp	P.O. Box 6666, Odessa, TX, 79760
Well produces oil or liquids, or location of tanks.	Is gas actually connected? When
Unit <u>H</u> Sec. <u>17</u> Twp. <u>18S</u> Rge. <u>29E</u>	<u>YES</u> <u>7-13-83</u>

This production is commingled with that from any other lease or pool, give commingling order number:

Designate Type of Completion - (X)	Oil Well	Gas Well	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.					
Deviation (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
Corrections			Depth Casing Shoe					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

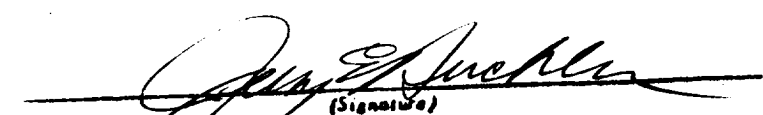
TEST DATA AND REQUEST FOR ALLOWABLE
L WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Casing 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 Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.


(Signature)
Area Supervisor
(Title)
September 23, 1983
(Date)

OIL CONSERVATION DIVISION

SEP 26 1983

APPROVED _____, 19____
BY _____
Original Signed By
Leslie A. Clements
Supervisor District II
TITLE _____

This form is to be filed in compliance with RULE 1494.
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.
Separate forms C-104 must be filed for each pool in multiply completed wells.