

Form C-104
Supersedes Old C-104 and C-11
Effective 1-1-85

RECEIVED BY
AUG 12 1985
O. C. D.
ARTESIA, OFFICE

Anadarko Petroleum Corporation

Address P. O. Box 2497 Midland, Texas 79702

Reason(s) for filing (check proper box)

New York

Recompletion

Change in Ownership ☒

Change in Transporter of:

CII

Casinghead Gas

Dry Gas

Condensate

Other (Please explain)

Change in Ownership Effective:

AUC 1.104

If change of ownership give name
and address of previous owner: _____

Anadarko Production Company, P.O. Box 2497, Midland, Texas 79702

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Travis "E" Federal	2	Loco Hills Grbg., San Andres	State, Federal or Fee Federal	NM23414

Location
Unit Letter M ; 500 Feet From The South Line and 500 Feet From The West
Line of Section 6 Township 18S Range 29E . NMPM, Eddy County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

DESIGNATION OF TRANSPORTER OF OIL AND GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐

JM Petroleum Corporation

Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐
Phillips Petroleum

Address (Give address to which approved copy of this form is to be sent)
2000 North Tower, Plaza of the Americas
Dallas, TX 75201

Dallas, TX 75201
Address (Give address to which approved copy of this form is to be sent)
10 W.W. Frank Phillips Bldg.
Bartlesville, OK 74004

	Unit	Sec.	Twp.	Pge.
If well produces oil or liquids, give location of tanks.	K	6	18S	29E

Is gas actually connected? When

Yes April 1984

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

COMPLETION DATA

COMPLETION DATA									
Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'tv.	Diff. Res'tv.
Date Spudded	Date Compl. Ready to Prod.			Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, CR, etc.)	Name of Producing Formation			Top Oil/Gas Pay			Tubing Depth		
Perforations							Depth Casing Shoe		

TUBING, CASING, AND CEMENTING RECORD

TUBING, CASING, AND CEMENTING RECORD			SACKS CEMENT
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	
			Posted ID-3
			9-6-86
			Op. - name chg.

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)

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

GAS WELL

GAS WELL		Bbls. Condensate/MMCF	Gravity of Condensate
Actual Prod. Test-MMCF/D	Length of Test		
Testing Method (prior, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

I. 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.

Rob Brandes
(Signature)

Senior Administrative Specialist

July 22, 1985

OIL CONSERVATION COMMISSION

APPROVED AUG 26 1985, 19

APPROVED _____
Original Signed By
BY _____ Les A. Clements

TITLE Supervisor District II

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviated tests taken on the well in accordance with RULE 111.

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 Form C-104 must be filed for each pool in monthly