

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	<input checked="" type="checkbox"/>
FILE	<input checked="" type="checkbox"/>
U.S.O.S.	<input type="checkbox"/>
LAND OFFICE	<input type="checkbox"/>
TRANSPORTER	<input checked="" type="checkbox"/>
OPERATOR	<input checked="" type="checkbox"/>
PRODUCTION OFFICE	<input type="checkbox"/>

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-78  
Format 06-01-83  
Page 1

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator	
Anadarko Petroleum Corporation	
Address	
P. O. Drawer 130, Artesia, New Mexico 88210	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership	Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate
Tank Battery approved for off-lease storage. <i>OK - 140</i>	

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.
Continental State	6	Turkey Track-SR-Qn-Gb-SA	State, <i>7/1/84/1/1/1</i>	B-8096
Location				
Unit Letter <i>0</i> : <i>330</i> Feet From The <i>South</i> Line and <i>1650</i> Feet From The <i>East</i>				
Line of Section <i>9</i> Township <i>18S</i> Range <i>29E</i> , NMPM, <i>Eddy</i> 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 Company	P. O. Box 159, 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)														
<table border="1"> <tr> <td>If well produces oil or liquids, give location of tanks.</td> <td>Unit</td> <td>Sec.</td> <td>Twp.</td> <td>Rge.</td> <td>Is gas actually connected?</td> <td>When</td> </tr> <tr> <td></td> <td>P</td> <td>9</td> <td>19S</td> <td>29E</td> <td><i>NO</i></td> <td></td> </tr> </table>		If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When		P	9	19S	29E	<i>NO</i>	
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When									
	P	9	19S	29E	<i>NO</i>										

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

*[Signature]*  
(Signature)  
Area Supervisor  
(Title)  
October 17, 1985  
(Date)

OIL CONSERVATION DIVISION  
APPROVED *NOV 5 1985*, 19  
BY *Les A. Clements*  
Original Signed By  
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.  
Separate Forms C-104 must be filed for each pool in multiply completed wells.