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FILE

U.S.G.S.

LAND OFFICE

TRANSPORTER

OIL

GAS

OPERATOR

PRODUCTION OFFICE

Operator

Anadarko Petroleum Corporation

Address

P. O. Box 2497 Midland, Texas 79702

NEW MEXICO OIL CONSERVATION COMMISSION

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED BY

AUG 12 1985

O. C. D.

ARTESIA, OFFICE

Form C-104

Supersedes Old C-104 and C-11

Effective 1-1-85

Reason(s) for filing (Check proper box)

Other (Please explain)

Change in Ownership Effective:

AUG 1 1985

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: Matlock

Well No.: 1

Pool Name, including Formation: Penasco Draw - Upper Penn

Kind of Lease: State, Federal or Fee Fee

Lease No.: ---

Location: Unit Letter J : 1980 Feet From The South Line and 1980 Feet From The East

Line of Section 4 Township 19S Range 25E NMPM, Eddy County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil or Condensate JM Petroleum Corporation

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

Name of Authorized Transporter of Casinghead Gas or Dry Gas None

Address (Give address to which approved copy of this form is to be sent)

If well produces oil or liquids, give location of tanks. Unit J Sec. 4 Twp. 19S Rge. 25E Is gas actually connected? No

COMPLETION DATA

Designate Type of Completion - (X)

Date Spudded

Date Compl. Ready to Prod.

Total Depth

P.B.T.D.

Elevations (DF, RKB, RT, GR, etc.)

Name of Producing Formation

Top Oil/Gas Pay

Tubing Depth

Perforations

Depth Casing Shoe

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE

CASING & TUBING SIZE

DEPTH SET

SACKS CEMENT

Posted ID-3 9-6-85 Op. name chg.

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

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

GAS WELL

Actual Prod. Test-MCF/D

Length of Test

Bbls. Condensate/MCF

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.

Rob Brandes (Signature)

Senior Administrative Specialist (Title)

July 22, 1985 (Date)

OIL CONSERVATION COMMISSION

APPROVED AUG 26 1985

BY Original Signed By Les A. Clements Supervisor District II

TITLE

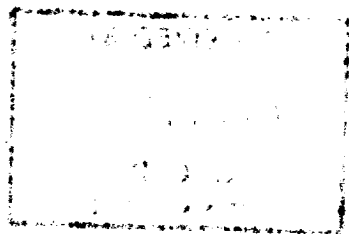
This form is to be filed in compliance with RULE 1104.

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

All sections of this form must be filled out completely for all wells on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of own well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multi-



1. *Antennae* (10-15 segments)
2. *Legs* (3 pairs)
3. *Wings* (2 pairs)
4. *Body* (10-15 segments)