

O. C. D.
ARTESIA, OFFICE

Form C-104
Revised 10-01-78
Format 06-01-83
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SANTA FE		✓	
FILE		✓	✓
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL	✓	
	GAS		
OPERATOR		✓	
PRODUCTION OFFICE			

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	Designate Transporter of Skim Oil. Transport <u>150</u> bbls skim oil to Transporter - J M Petroleum Corporation.
Change in Transporter of: <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate

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.
Dagger Draw SWD	1	Dagger Draw-Upper Penn., North	Pay/Pct/P/Fee P/Fee	FEE
Location				
Unit Letter <u>E</u> : <u>1495</u> Feet From The <u>North</u> Line and <u>225</u> Feet From The <u>West</u>				
Line of Section <u>22</u> Township <u>19S</u> Range <u>25E</u> , NMPM, <u>Eddy</u> 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) 200 North Tower Plaza of the Americas Dallas, Texas 75201	
J M Petroleum Corporation						
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)	
None					N/A	
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	E	22	19S	25E	No	

Post FD-2
2-7-86
Add LT: JMA

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.

Joe Hightower
(Signature)
Field Foreman
(Title)

January 28, 1986

(Date)

OIL CONSERVATION DIVISION

APPROVED JAN 31 1986, 1986

BY _____ Original Signed By
Les A. Clements

TITLE Supervisor District 11

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 allow-
able 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.