	RECEIVED BY		
	RECEIVED BY		·
	MAR 10 1986		
STATE OF NEW MEXICO	O, C, D,		
ENERGY AND MINERALS DEPARTMENT	ARTESIA, OFFICE		Form C-104
DISTRIBUTION			Revised 10-01-78 Format 06-01-83
BANTA PE		TION DIVISION	Page 1
FILE	SANTA FE, NEW	_	
LAND OFFICE			
TRANSPONTER GAS		RALLOWABLE	
		ND PORT OIL AND NATURAL GAS	
<u>I.</u>			
Anadarko Petroleum Corpora	ation		
Address			
P. O. Drawer 130, Artesia,	, New Mexico 88211-0		
Reason(s) for filing (Check proper box)	ange in Transporter of:	Other (Please explain) Design Skim Oil. Transport	
		v Can Oil. Note: J M Pet	
Change in Ownership	Casinghead Gas Co	ondensate they didn't want this	skim oil.
Dagger Draw SWD	ell No. Pool Name, Including Fo	per Penn., North Splat Fadelal by Fac	• Lease No. FEE
Location E 1495 -	eet From The North Lin	a and 225 Feet From The	West
	100	· · · · · · · · · · · · · · · · · · ·	
Line of Section 22 Township	19S Bange	25E , NMPM, Eddy	County
III. DESIGNATION OF TRANSPORTER	CF OIL AND NATURAL	GAS	
Name of Authorized Transporter of Cill or Condensate		Address (Give address to which approved copy of this form is to be sent) P. O. Box 159, Artesia, New Mexico 88211-0159	
Name of Authorized Transporter of Casinghead Gas or Dry Gas		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.	Sec. Twp. Rge. 22 195 25E	Is gas actually connected? When NO	
If this production is commingled with that f	rom any other lease or pool,	give commingling order number:	
NOTE: Complete Parts IV and V on rea	verse side if necessary.		
VI. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION DIVISION	
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.		APPROVED MAR 12 1986 19	
		BYmile Williams	
		TITLE OIL AND GAS INST	rector
I had E light	i l	This form is to be filed in compli-	
Signature)		If this is a request for allowable for a newly drilled or deepend well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with AULE 111.	
- Field Foreman (Tiule)		All sections of this form must be filled out completely for silor- able on new and recompleted wells.	
March 10, 1986 (Date)		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 fi completed wells.	