Submit 5 Copies Appropriate District Office DISTRICTI		•••	lineral	s and Natu	w Mexico ral Resourc	ent	at Bottom of Page			
P.O. Box 1980, Hobbe, NM 88240 DI <u>STRICT II</u> P.O. Drawer DD, Astesia, NM 88210	OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, New Mexico 87504-2088								Ûp	
DISTRICT III 1000 Rio Brazos R.d., Azzec, NM 87410		JEST F	OR AL		LE AND /	AUTHORI				
I. TO TRANSPORT OIL AND NATURAL GAS								Well API Mar 2 9 7 10 1		
Anadarko Petroleum Corporation								30-015-24677		
Address PO Drawer 130, Ar				1-0130)					
PO Drawer 150, AL Reason(s) for Filing (Check proper box)	Lesia	<u>, 1414</u>	0021		Oth	er (Please expl	in)			
New Well		Change in								
Recompletion	Oil X Dry Gas Casinghead Gas Condensate									
If change of operator give name										
and address of previous operator		ACE								
II. DESCRIPTION OF WELL	Well No. Pool Name, Including Formation						Kind of Lease Lease No.			
Dickey Sullivan		3	Tur	key Tra	ick-7R-Qi	n-GB-SA	State,	Research Ref	NM B-8326	
Location	. 6	60	Feet Fr	rom The NO	orth Lin	e and16	5 <u>50</u> F e	et From The	WestLine	
Uait Letter	_ •							÷.	County	
Section 15 Township	<u> </u>	<u>95</u>	Range	29	NE N	MPM,	Edd	<u>Y</u>		
III. DESIGNATION OF TRAN	SPORTE			D NATU	RAL GAS		L	norms of this fa-	n is to be cent]	
Name of Authorized Transporter of Oil Lantern Petroleum		or Conde	n sale		Address (Giv			<i>copy of this form</i> ad, TX 7		
Lantern Petroleun Name of Authorized Transporter of Casing None			or Dry	Gas	Address (Giv	e address to w	hich approved	copy of this for	n is to be sent)	
lf well produces oil or liquids, pive location of tanks.	Unit D	D 15 19S 29E NO								
If this production is commingled with that I IV. COMPLETION DATA	from any of	Oil We		ve comming! Gas Well	ing order num		Deepen	Plug Back S	ame Res'v Diff Res'v	
Designate Type of Completion		i	i		l			ļi	İ	
Date Spudded	Date Com	pl. Ready I	to Prod.		Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation				Top Oil/Gas Pay			Tubing Depth		
					i			Depth Casing Shoe		
Perforations										
	TUBING, CASING AND									
HOLE SIZE	CASING & TUBING SIZE				DEPTH SET			Part ID-3		
								4-8-94		
								tA	g hTi NPC	
V. TEST DATA AND REQUES	ST FOR	ALLOW	ABLE	,	L	<u> </u>		- I	, ,	
OIL WELL (Test must be after r	ecovery of	otal volum	e of load	oil and mus	be equal to of	exceed top all lethod (Flow, p	owable for thi	is depth or be for etc.)	r full Z4 hours.)	
Date First New Oil Run To Tank	Date of Test				Literating Interior (s. sent hard a la san					
Length of Test	Tubing Pressure				Casing Press	Casing Pressure			Choke Size	
Actual Prod. During Test	Oil - Bbls.				Water - Bbls.			Gas- MCF		
GAS WELL	.l									
Actual Prod. Test - MCF/D	Length of Test				Bbis. Condensate/MMCF			Gravity of Condensate		
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size		
VI. OPERATOR CERTIFIC				NCE			NSERV		DIVISION	
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.					Date ApprovedMAR 1 8 1994					
1. Man	11-	10								
Howardy H	ret	1			By_	<u> </u>		(arthl(r 11	
Signature Howard Hackett, Field Foreman Printed Name Title						By				
Printed Name . 03-18-94		(505)	677-		Title	9				
Date		T	elephone	No.					وبالالال المراجعة المراجع والمتخفي	

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.

All sections of this form must be filled out for allowable on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.

4) Separate Form C-104 must be filed for each pool in multiply completed wells.