Submit 5 Copies	Enerny Mine	State of New Mexico Energy, Minerals and Natural Resources Department					Form C-104 Reviewd 1-1-89	
Appropriate District Office DISTRICT I P.O. Box 1980, H-bbs, NM 88240	07				_	CEIVED	See Instructions at Bottom of Page	
DISTRICT	OIL CONSERVATION DIVISION P.O. Box 2088				N SEF	- 7 1993		
P.O. Drawer DD, Artesia, NM 88210 DISTRICT III	Santa Fe, New Mexico 87504-2088				Ç		•	
1010 Rio Brazos Rd., Aztec, NM 87410	REQUEST FOR							
I. Operator	TOTRANS	SPORT OIL	AND NAT	URAL GA	S Well A	PI No.		
Anadarko Petroleum Corporation					300	152738		
PO Drawer 130, Art	tesia, NM 882	11-0130						
Peakon(a) for Filing (Check proper box) New Well Recompletion Change in Operator If change of operator give same	Change in Trai Oil [_] Dry Casinghead Gas [_] Cor	nsporter of:	(4.9)	r (Flease esplai		ne	••	
and address of previous operator	ANDIFASE							
Lesse Name Well No. Pool Name, Including Formation Continental "A" State 15 Turkey Track-7R-Qn-GB-SA					State,]	(Leane GNGGUDGKF64	Lease No. E-2943	
Unit LetterB	. <u> </u>	f From The <u>N</u>	orth Line	and19	80 Fe	et From The $_{ m E}$ (as <u>t</u> Line	
Section KIL Township	p 195 Rai	nge29E	, NN	IPM,	Eddy		County	
III. DESIGNATION OF TRAN	SPORTER OF OIL	AND NATU	RAL GAS	address 10 whi	ch approved	copy of this form	is to be sent)	
Name of Authorized Transporter of Casing	ead Gas [] or Dry Gas [] Address (Give address to which a				ch approved	pproved copy of this form is to be sent)		
If well produces oil or liquids, give location of tanks.	Unit Sec. Tw	Twp. Rge. Is gan actually connected? When				7		
If this production is commingled with that	from any other lease or pool	, give comming!	ing order numb	er:				
IV. COMPLETION DATA	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back Sa	me Resiv Diff Resiv	
Designate Type of Completion	- (X) Date Compl. Ready to Pro	L	Total Depth		l	P.B.T.D.		
	Name of Producing Forma	Top Oil/Gas P	Ton Oil/Cas Pay					
Flevations (DF, RKB, RT, GR, etc.)					Tubing Depth Depth Casing Shoe			
Perforations						Depth Casing Si	nce	
	the second se	TUBING, CASING AND					CKS CEMENT	
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			PertID-3		
						9-17-93		
					······································	cry	be name -	
V. TEST DATA AND REQUES OIL WELL (Test must be after r Date First New Oil Run To Tank	TFORALLOWABI ecovery of total volume of lo Date of Test	E ad oil and must	be equal to or Producing Me	exceed top allow that (Flow, pure	wable for this np, gas lift, ei	depth or be for J ic.)	full 24 hours.)	
l'enpith of Test	Tubing Pressure		Casing Pressure			Choke Size		
Actual Fred. During Test	(Vil - Bhls.		Wmer - Bbls.			Gas- MCF		
GAS WELL Actual Fred Test - MCF/D	Length of Test		Bble. Condensate/MMCF			Gravity of Condentate		
lecting Method (pilot, back pr.)	Tubing Pressure (Shut-in)		Casing Pressure (Shut-in)			Choke Size		
VI. ()PERATOR 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 above is true and complete to the best of my knowledge and belief.			OIL CONSERVATION DIVISION Date Approved SEP - 8 1993					
Signature Jerry E. Buckles, Area Supervisor Frinted Name 09-03-93 [505] 677-2411 Lelephone No				ByORIGINAL SIGNED BY MIKE WILLIAMS TitleSUPERVISOR, DISTRICT II				
			<u> </u>					

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.

2) All sections of this form must be filled out for allowable on new and recompleted wells.

3) 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.