	DISTILUUTION SANTA FE FILE U.S.G.S. LAND OF FICE	AUTHORIZATION TO TR	FOR ALLOWABLE AND HOLVET OIL AND NATURAL	Poim C+104 Supersedes Old C+104 and (Ellactive 1+1+65 , GAS
	TRANSPORTER GAS	AUG 12	1985	
1.	PROFATION OFFICE	0.0	., D.	
	ARTESIA, OFFICE			
	Address P. O. Box 2497, Midland, Texas 79702			
	Reason(s) for Jiling (Check proper box New We!) Recompletion Change in Ownership XX	Change in Transporter of: Cit Dry Co Casinghead Gas Conde		rship effective: [1] [1985]
	If change of ownership give name and address of previous owner	Anadarko Production Com	pany, P. O. Box 2497, M	idland, Texas 79702
п. 	DESCRIPTION OF WELL AND Lease Name Tidewater State Localion T 1980	LEASE Vell No. Pool Name, Including F 1 Square Lake Grb Feet From The South Lin	og., San Andres Stote, Fede	ral cr Fee State D-7638
		waship 16S Bange	31Е , ммрм,	Eddy County
		TER OF OIL AND NATURAL GA	15	
11.	Neme of Authorized Transporter of Cil Navajo Refining Company	Condensate	Address (Give address to which app P.O. Box 159, Artesia,	roved copy of this form is to be sent) NM 88210
	Navajo Kerining Company Nere of Authorized Transporter of Car Phillips Petroleum	singhead Gas 🔀 or Dry Gas 🔤	10 W.W. Frank Phillips Bartlesville, OK 74004	roved copy of this form is to be sent) Bldg.
	If well produces oil or liquida, give location of tanks.	Unit Sec. Twp. P.ge.	Yes	June 1962
	If this production is commingled with COMPLETION DATA	th that from any other lease or pool,	give commingling order number:	
v.	Designate Type of Completic	on - (X)	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
	Elevations (DF. RKB, RT, GR. esc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
	Periorations Depth Casing Shoe			Depth Casing Snoe
ł			CEMENTING RECORD	SACKS CEMENT
	HOLE SIZE	CASING & TUBING SIZE		Post ID-3
ļ				9-6-85 Chy Op Name
l			l	and must be coual to or exceed top allo
	V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exc able for this depth or be for full 24 hours) OIL. WELL Date of Test Date First New Cil Bun To Taxis Date of Test			
	Length of Test	Tubing Presaure	Costng Pressure	Cheke Size
	Actual Fred. During Test	C11-Bbls.	Water - Bbls.	Goa-MCF
ŀ				
ſ	GAS WELL Actual Fred. Tool-MCF/D	Length of Test	Etia. Condensate/MMCF	Gravity of Condensale
	Testing Nothod (pitot, back pr.)	Tubing Freesews (Shut-in)	Cosing Pressure (Shut-in)	Cheke Size
] גר	CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION AUG 29 1985	
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given			APPROVED, 19, 19, Original Signed By	
•	Commission have been complied with and that the best of my knowledge and belief.		BYLes A. Clements	
			TITLE Supervisor District If This form is to be filed in compliance with RULE 1104.	
Sr. Administrative Specialist (Tille) July 22, 1985 (Date)			If this is a request for allowable for a newly drilled or desper- well, this form must be accompanied by a tabulation of the deviate tests taken on the well in accordance with NULE 111. All sections of this form must be filled out completely for ellc 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 filled for each pool in multip condition.	