	•		
STATE OF NEW MEXICO		-*	Form C-104 Revised 10-1-78
Y AND MINERALS DEPARTMENT	OIL CONSERVA	TION DIVISI	
DISTAINUTION	P. O. BOX		RECEIVED
	SANTA FE, NEW		<u> </u>
4.U.9.		A	PR 21 1983
AND OFFICE	REQUEST FOR		
AANSPONTER UAS	AN AUTHORIZATION TO TRANSPO		
PERATOR V	AUTHORIZATION TO TRAISIN		· · · · · · · · · · · · · · · · · · ·
rper 0101		CASI	NGHEAD GAS MUST NOT BE
Anadarko Production Com	ipany V	UNL	RED AFTER 7-22-83 ESS AN EXCEPTION TO
P. O. Drawer 130, Artes	sia, New Mexico 88210	IS OI	BTAINED R-326
(eoson(s) for filing (Check proper box)	Other (Please explain)	/
iew Well 🗍	Change in Transporter of:		
	Casinghead Gas Condens		
Change in Ownership			
change of ownership give name nd address of previous owner			
ESCRIPTION OF WELL AND	I.EASF. Well No. Pool Name, Including For	rmation Kind of L	ease Lease No. 3
Continental "A" State	8 Turkey Track-SB		### E-2943
Location			
Unit Letter I ::	310 Feet From The South Line	and990 Feet Fr	om TheEast
10 т	mahip 195 Range	29E , NMPM.	Eddy County
Line of Section 1.	mship 170 Hange		
ESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GAS	S	pproved copy of this form is to be sent)
Name of Authorized Transporter of CI	1 Condensate	Address (Give address to which up	
Navajo Crude Oil Purch	asing Company	Address (Give address to which a	pproved copy of this form is to be sent)
None			
If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected?	When
give location of tanks.	I 10 195 29E	No	·
	ith that from any other lease or pool, i	give commingling order number:	·
COMPLETION DATA	Oil Well Gas Well	New Well Workover Deeper	
Designate Type of Completi			P.B.T.D.
Date Spudded	Date Compl. Ready to Prod. 8=14=80	Total Depth 3200 *	2345'
7-15-80 Elevations (DF, RKB, RT, GR, etc.;	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
3376' GL	7-Rivers-Queen	1642'	2282 KB
Perforations			Depth Casing Shoe
Seven Rivers: 1642	-1728; Queen: 2229-2271	CEMENTING RECORD	3199 [•] KB
	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
HOLE SIZE	13-3/8 ^w	48 KB	5 Yds Redimix
12-1/4	8-5/8"	321 KB	275 Sx + Redimix/Surface
7-7/8"	4-1/2	3199' KB	675 Sx
	1 178	1 2282	d oil and must be equal to or exceed top allows:
FEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a) able for this de	pth or be for full 24 hours)	
Date First New Oil Hun To Tanks	Date of Test	Producing Method (Flow, pump. g	as lift, etc.)
3- 9-83 (Recomp1)	3-16-83	Pumping	Choke Size
Length of Test	Tubing Pressure	20#	None
24 Hours Actual Prod. During Test	Oil-Bbis.	Water-Bbls.	Gas + MCF
98	35	63	20
			· ·
GAS WELL	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate
Keilal Pila. Teere Merino			
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Sbut-in)	Choke Size
			IVATION DIVISION
CERTIFICATE OF COMPLIA	SCE .		0.0.4000
	regulations of the Oll Conservation	APPROVED	
Will have been complied with	th and that the information given	BY	
Division have been complete to the best of my knowledge and belief.		Supervisor District II	
	1	TITLE	
1 And	unhler		d in compliance with MULE 1104. allowable for a newly drilled or deepenew
(Signature)		If this is a request for allowable for a newly drilled or deepened 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 well, this form must be accompanied by a tabulation of the deviation	
Area Supervisor		All sections of this form must be filled out completely for allow-	
(Tule)		i able on new and recompleted weller	
April 20, 1983		Fill out only Sections 1, 11, 111, and VI for changes of owner. Well name or number, or transporter, or other such change of condition.	
(Date)		Separate Forms C-104 must be filed for each post in multiply	
		a number of wells.	