

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-1-78

CO. OF APPLICANT DESIGNED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.U.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PROMOTION OFFICE	

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator <u>Anadarko Production Company</u>	
Address <u>P.O. Box 806 Eunice, New Mexico 88231</u>	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	Change in Transporter oil: <input type="checkbox"/>
Recompletion <input checked="" type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
<u>Re-entry</u>	

If change of ownership give name
and address of previous owner _____

DESCRIPTION OF WELL AND LEASE

Lease Name <u>Teas Yates Unit</u>	Well No. <u>5-4</u>	Pool Name, including Formation <u>Teas Yates Seven Rivers</u>	Kind of Lease State, Federal or Fee <u>Federal</u>	Lease No. <u>LC065658</u>
Location				
Unit Letter <u>E</u> : <u>2310</u> Feet From The <u>North</u> Line and <u>990</u> Feet From The <u>West</u>				
Line of Section <u>14</u> Township <u>20S</u> Range <u>33E</u> , NMPM, <u>Lea</u> County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>Texas-New Mexico Pipeline Company</u>	<u>P.O. Box 1510 Midland, Texas 79701</u>
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>Phillips Petroleum Company</u>	<u>4001 Penbrook Odessa, Texas 79762</u>
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
<u>H</u> <u>14</u> <u>20S</u> <u>33E</u>	<u>Yes</u> <u>12-15-82</u>

If this production is commingled with that from any other lease or pool, give commingling order number: _____

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input type="checkbox"/>	Workover <input checked="" type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded <u>12-24-53</u>	Date Compl. Ready to Prod. <u>12-14-82</u>		Total Depth <u>3416'</u>		P.B.T.D. <u>3334'</u>			
Elevations (DF, RKB, RT, GR, etc.) <u>3578' GL</u>	Name of Producing Formation <u>Yates</u>		Top Oil/Gas Pay <u>3163'</u>		Tubing Depth <u>3304'</u>			
Perforations <u>3163'-93' 3198'-3208' 3213'-3264' 3284'-3300'</u>					Depth Casing Shoe <u>3370'</u>			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
<u>8 1/4"</u>	<u>7" 20#</u>		<u>3370'</u>		<u>450 8X</u>			
<u>7"</u>	<u>4 1/2" 10.5#</u>		<u>3364'</u>		<u>250 8X</u>			

TEST DATA AND REQUEST FOR ALLOWABLE
OIL WELL

(Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks <u>12-20-82</u>	Date of Test <u>12-22-82</u>	Producing Method (Flow, pump, gas lift, etc.) <u>Pump</u>	
Length of Test <u>24 hrs</u>	Tubing Pressure <u>25#</u>	Casing Pressure <u>20#</u>	Choke Size
Actual Prod. During Test <u>88</u>	Oil - Bbls. <u>60</u>	Water - Bbls. <u>28</u>	Gas - MCF <u>3.4</u>

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (prior, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

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.

Howard O. Shultz
(Signature)
Production Foreman
(Title)
December 28, 1982
(Date)

OIL CONSERVATION DIVISION

APPROVED JAN 7 1983, 19_____
ORIGINAL SIGNED BY
BY JERRY SEATON
TITLE DISTRICT 1 SUPR.

This form is to be filed in compliance with RULE 1104.

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 tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable 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.

Generate Forms C-104 must be filed for each well in this district.