Submit 5 Copies
Appropriate District Office
DISTRICT 1
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

OIL CONSERVATION DIVISION P.O. Box 2088

DISTRICTIII

Santa Fe, New Mexico 87504-2088

1000 Řio Brazos Rd., Aztec, NM 87410	REQUEST FO	OR ALLOWAE	SLE AND NA	AUTHORIZ	ZATION AS				
I. Operator	TO TRANSPORT OIL AND NATURAL GAS					Well API No. 30-025-28030			
Anadarko Petroleum Corporation					3	0-02	5-28	3030	
Address P.O. Drawer 130,	Artesia, Ne	w Mexico	88211-		25-1		·		
Reason(s) for Filing (Check proper box)	Change in	Transporter of:	_	er (Please explo		rtor o	f oil		
New Well Recompletion		Dry Gas		nge in Effecti					
Change in Operator	Casinghead Gas	· —		orrecer	ve date	127			
f change of operator give name and address of previous operator						 		····	
U. DESCRIPTION OF WELL	AND LEASE								
Lease Name Teas Yates Unit	Well No. Pool Name, Includi		ng Formation ates 7-	Rivers		Kind of Lease State, Federal & Federal		70311	
Location E	2490	Feet From The	orth	, se and	10 Fee	et From The _	Wes	st Line	
Unit Letter	: 20S	331	71				Lea	County	
Section 13 Towns	itp 203	Range	, <u>,</u> , <u>N</u>	мрм,				County	
III. DESIGNATION OF TRAI	NSPORTER OF O	IL AND NATU	RAL GAS	ve address to w		of this C	man in to be se		
Name of Authorized Transporter of Oil	rv vi or Conder	isaté	Voguess (O)	ve acacress to w					
Navajo Refining Co	mpany-Truck	DIVISION	ATIO ENDIGI	orawer we address so w	159, AL hich approved	copy of this fo	orm is to be se	n/)	
Name of Authorized Transporter of Casi Phillips 66 Natura	1 Gas EFFECTIV	E: reprud ry l Gas Corporati	1772	Penbroo	k Odes	sa. TX	7976	2	
If well produces oil or liquids,	Unit Sec.	Twp. Kge.	It But accoun	ly compensed	When	1			
give location of tanks.	H 14	20S 33E	<u> </u>	Yes	l	May,	1703		
If this production is commingled with the	t from any other lease or	pool, give commingl	ling order nun	nber:					
IV. COMPLETION DATA	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion			j	<u>i</u>	<u> </u>	,	l	<u></u>	
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation			Top Oil/Gas	Top Oil/Gas Pay			Tubing Depth		
Perforations						Depth Casing Shoe			
	TIDING	CASING AND	CEMENT	ING RECOR	RD	1			
HOLE SIZE		SING & TUBING SIZE		CEMENTING RECORD DEPTH SET		SACKS CEMEN		NT	
HOLE SIZE	OAOMO C.								
			 			 			
V. TEST DATA AND REQUE	ST FOR ALLOW	ABLE	<u></u>			L			
OIL WELL (Test must be after	recovery of total volume	of load oil and must	be equal to o	r exceed top all	owable for this	depth or be j	for full 24 hou	rs.)	
Date First New Oil Run To Tank	Date of Test		Producing M	lethod (Flow, p	ump, gas lift, e	ic.)			
Length of Test	Tubing Pressure	Tubing Pressure		Casing Pressure			Choke Size		
Actual Prod. During Test	Oil - Bbls.		Water - Bbis.			Gas- MCF			
GAS WELL			1					=	
Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF			Gravity of Condensate				
Testing Method (pitot, back pr.)	Tubing Pressure (Shu	Casing Pres	Casing Pressure (Shut in)			Choke Size			
VI. OPERATOR CERTIFIC I hereby certify that the rules and reg Division have been complied with an is true and complete to the best of my	ulations of the Oil Conse d that the information giv	rvation		OIL COI		海岸	DIVISIO	DN E	
_	Muchle	en en			£	ha Far			
Signature Jerry E. Buckles		ervisor	∥ By_			,ra⊥ ∴Geologi	st	······································	
Printed Name December 5, 1990	(505)74	Title 18-3368	Title	-			·		
Date	Tel	ephone No.	11						

- 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.