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u.s.g.s.			L
LAND OFFICE			
IRANSPORTER	OIL		
	GAS		
OPERATOR			

EW MEXICO OIL CONSERVATION COMMISS. REQUEST FOR ALLOWABLE AND

Form C-104 Supersedes Old C-104 and C-11s Ellective 1-1-65

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

IRANSPORTER GAS				
OPERATOR				
PROPATION OFFICE				
Anadarko Petroleum (Cornoration			
Address	30270200			
P. O. Box 2497, Mid				
Reason(s) for liling (Check proper	Change in Transporter of:	Other (Please explain) Change in owner	rship effective:	
New Well Recompletion	CII Diy C			
Change in Ownership XX	Casinghead Gas Cond	ensure AUG 1	1985	
If change of ownership give nar and address of previous owner		npany, P. O. Box 2497, M	idland, Texas 79702	
DECEDIBITION OF WELL 4	ND I FASE			
DESCRIPTION OF WELL A	Well No. Pool Name, Including		,	
LMPSU Tract 1	1 Langlie-Matti	ix SR, Qn, Grbg State, Feder	ral or Fee Fee –	
Location	220 - South	ine and 330 Feet From	The West	
Unit Letter M ;	330 Feet From The South Li	_	İ	
Line of Section 14	Township 22S Range	37E , NMPM,	Lea County	
		• •		
DESIGNATION OF TRANSP Name of Authorized Transporter of	ORTER OF OIL AND NATURAL G	Access (Give address to which appr	oved copy of this form is to be sent)	
Shell Pipeline Compa Texas-New Mexico Pip	ny	P. O. Box 1910, Midlan	Angelo, Texas 76906 oved copy of this form is to be sent)	
Name of Authorized Transporter o	Casinghead Gas X or Dry Gas	į.	· ·	
Texaco Producing Inc		P. O. Box 3000, Tulsa	, Oklahoma 74102	
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Pige.	yes		
	with that from any other lease or pool,			
COMPLETION DATA		New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.	
Designate Type of Compl	etion - (X) Oil Well Gas Well	New Well Workover Deepen	1	
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
Elevations (DF, RKB, RT, GR, etc.	Name of Producing Formation	Top Oll/Gas Pay	Tubing Depth	
Perforations			Depth Casing Shoe	
Felialdiona				
	TUBING, CASING, AN	D CEMENTING RECORD		
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
		<u>i</u>	<u> </u>	
TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be a able for this d.	after recovery of sotal volume of load oil epth or be for full 24 hours)	l and must be equal to or exceed top allow-	
DIL WELL Date First New Oil Run To Tanks	Date of Test	Freducing Method (Flow, pump, gas l	ifi, elc.)	
			Cheke Size	
Length of Test	Tubing Pressure	Casing Pressure	Chief Circ	
Actual Fred. During Test	Cil-Bbis.	Water-Bbls.	Gos-MCF	
JAS WELL Actual Fred, Test-MOF/D	Length of Test	Bois, Condensate/AMCF	Gravity of Condensate	
Actual Fied. 1881-MoryD	Langua de la companya		1	
Testing Mathod (pirot, back pr.)	Tubing Pressure (Shut-in)	Cosing Pressure (Shut-in)	Choke Size	
			A TION CONTUCTION	
ERTIFICATE OF COMPLI	ANCE		ATION COMMISSION	
hereby certify that the rules and regulations of the Oil Conservation ommission have been complied with and that the information given 31.4NAL SIGNED BY JERRY SEXHON		APPROVED AUG 2 1 1985		
ove is true and complete to the best of my knowledge and bellef. BY				
		II.		
This form is to be flied in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deeper.			compliance with RULE 1104.	
y your pra	Well, this form must be accompanied by a tabulation of the discontinuous taken on the well in accordance with MULE 111.		inted by a fabulation of the contacts	
•	Sr. Administrative Specialist All anctions of this form must be filled out completely for		ust be filled out completely for allow	
(Title) able on new and recompleted wells.		alis.		
July 22, 1985 Fill out only Sections I, II, III, and VI for changes well name or number, or transporter, or other such change of		fer or other such cusuals or constituen		
Senerate Forms C-104 must be filed for each pool in mul				
	'	Separate Forms C-104 mus	it be filed for each pool in multifity	