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TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

NEW MEXICO OIL. CONSERVATION COMMISSION Form C-104 Supersedes Old C-104 and C-110 REQUEST FOR ALLOWABLE O. C. S. ANDOSS OF FICE O. C. S. AUTHORIZATION TO TRANSPORT OIL AND NAT Operator ANADARKO PRODUCTION COMPANY Address P. O. Box 247, Hobbs, New Mexico Reason(s) for filing (Check proper box) Other (Please explain) Formerly reported as Texas Pacific Oil Co. Elliott B-29. Committed to LMPSU effective Change in Transporter of: New Well Dry Gas Recompletion 10/1/66. Condensate Casinahead Gas Change in Ownership X If change of ownership give name and address of previous owner ___ Texas Pacific Oil Company, P. O. Box 1688, Hobbs, New Mexico II. DESCRIPTION OF WELL AND LEASE Well No. Fool Name, Including Formation Kind of Lease Lease Name Langlie Mattix Penrose XXX, FederalXXXXX Langlie Mattix - Queen Sand Unit - Tract No. 39 330 Feet From The South fine and 1650 Feet From The East Unit Letter O , MMPM, Range 37 East , Township 22 South Lea Line of Section III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Oil 🗶 P. O. Box 1510, Midland, Texas

Address (Give address to which approved copy of this form is to be sent) Texas-New Mexico Pipe Line Company Name of Authorized Transporter of Casinghead Gas 🗶 Skelly Oil Company P. O. Box 1135, Eunice New Mexico Rge. Two. Sec. If well produces oil or liquids, give location of tanks. P 29 22 S 37 E Yes Not Available If this production is commingled with that from any other lease or pool, give commingling order number: **EFFECTIVE JANUARY 31, 1977,** SKELLY OIL COMPANY MERGED IV. COMPLETION DATA Oil Well Gas Well INTO GETTY OIL COMPANY. Designate Type of Completion - (X) Total Depth Date Compl. Ready to Prod. Date Spudded Tubing Depth Name of Producing Formation Top Oil/Gas Pay Fool Depth Casing Shoe Perforations TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT CASING & TUBING SIZE DEPTH SET HOLE SIZE (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) V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tanks Date of Test Choke Size Casing Pressure Length of Test Tubing Pressure Water-Bbls. Gas - MCF Oil-Bbls. Actual Prod. During Test **GAS WELL** Gravity of Condensate Bbls. Condensate/MMCF Actual Prod. Test-MCF/D Length of Test Casing Pressure Choke Size Testing Method (pitot, back pr.) Tubing Pressure

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

(Title) November 10, 1966

(Date)

OIL CONSERVATION COMMISSION

APPROVED	, 19
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TITLE	

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 Sections I, II, III, and VI only for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

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