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LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRODUCTION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-105
Effective 1-1-65

I. Operator
Anadarko Petroleum Corporation
Address
P. O. Box 2497, Midland, Texas 79702
Reason(s) for filing (Check proper box)
New Well ☐ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☒ Casinghead Gas ☐ Condensate ☐
Other (Please explain)
Change in ownership effective:
AUG 1 1985
If change of ownership give name and address of previous owner: Anadarko Production Company, P. O. Box 2497, Midland, Texas 79702

II. DESCRIPTION OF WELL AND LEASE
Lease Name: LMPSU Tract 36
Well No.: 2
Pool Name, Including Formation: Langlie-Mattix SR, Qn, Grbg
Kind of Lease: State, Federal or Fee
Fee
Lease No.: -
Location
Unit Letter: A; 330 Feet From The North Line and 990 Feet From The East
Line of Section: 34 Township: 22S Range: 37E, NMPM, Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil ☒ or Condensate ☐
Shell Pipeline Company
Texas-New Mexico Pipeline Company
Address (Give address to which approved copy of this form is to be sent)
P. O. Box 1910, Midland, Texas 79701
P. O. Box 60028, San Angelo, Texas 76906
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐
Texaco Producing Inc.
Address (Give address to which approved copy of this form is to be sent)
P. O. Box 3000, Tulsa, Oklahoma 74102
If well produces oil or liquids, give location of tanks:
Unit: 0 Sec: 27 Twp: 22S Rge: 37E
Is gas actually connected? yes When: NA

If this production is commingled with that from any other lease or pool, give commingling order number:
V. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (DF, RAB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
Perforations						Depth Casing Shoe		
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT		

VI. 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: Date of Test: Producing Method (Flow, pump, gas lift, etc.):
Length of Test: Tubing Pressure: Casing Pressure: Choke Size:
Actual Prod. During Test: Oil-Bbls.: Water-Bbls.: Gas-MCF:

GAS WELL
Actual Prod. Test-MCF/D: Length of Test: Bbls. Condensate/MMCF: Gravity of Condensate:
Testing Method (pilot, back pr.): Tubing Pressure (shut-in): Casing Pressure (shut-in): Choke Size:

VII. 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.
Sr. Administrative Specialist
July 24, 1985
OIL CONSERVATION COMMISSION
APPROVED AUG 21 1985
BY ORIGINAL SIGNED BY JERRY SEXTON
TITLE DISTRICT I SUPERVISOR
This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deeper well, this form must be accompanied by a tabulation of the deviate tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for all able on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of oil well name or number, or transporter, or other such change of conditions.
Separate Forms C-104 must be filed for each pool in newly completed wells.

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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name Langlie Mattix Penrose Sand Unit
2. Name of Operator Anadarko Production Company	8. Farm or Lease Name Tract No. 36
3. Address of Operator P. O. Box 806, Eunice, New Mexico 88231	9. Well No. 21
4. Location of Well UNIT LETTER <u>A</u> , <u>330</u> FEET FROM THE <u>North</u> LINE AND <u>990</u> FEET FROM THE <u>East</u> LINE, SECTION <u>34</u> TOWNSHIP <u>22S</u> RANGE <u>37E</u> NMPM.	10. Field and Pool, or Wildcat Langlie Mattix
15. Elevation (Show whether DF, RT, GR, etc.) 3322' GR	12. County Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER <input checked="" type="checkbox"/> Bring csg. valves to ground level.

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

- Cellars were dug out for casing pressure checks.
- Connections were added to the surface casing and valves were raised to ground level.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED <u>Al Anderson</u>	TITLE <u>Area Supervisor</u>	DATE <u>3-18-75</u>
APPROVED BY <u>Nathan E. Mcgg</u>	TITLE _____	DATE _____
CONDITION OF APPROVAL, IF ANY:		