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TRANSPORTER OIL		
TRANSPORTER GAS		
OPERATOR		
PRORATION 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
Effective 1-1-65

Operator
Anadarko Production Company

Address

Reason(s) for filing (Check proper box)
New Well [X]
Recompletion [ ]
Change in Ownership [ ]
Change in Transporter of:
Oil [X]
Casinghead Gas [ ]
Dry Gas [ ]
Condensate [ ]

Other (Please explain)

If change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
LMPSU 13E	10	Langlie Mattix ~~Penrose~~ Grayburg	State, Federal or Fee Fee	

Location
Unit Letter B : 1170 Feet From The North Line and 2630' Feet From The East

Line of Section 27 Township 22S Range 37E, NMPM, Lea County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil [X] or Condensate [ ]
Shell Pipeline Company

Address (Give address to which approved copy of this form is to be sent)
P.O. Box 1165 Eunice, New Mexico 88231

Name of Authorized Transporter of Casinghead Gas [ ] or Dry Gas [ ]
Getty Oil Company

Address (Give address to which approved copy of this form is to be sent)
Two Midland National Center Midland, Texas

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	K	22	22S	37E	Yes	6-17-83

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
	X		X					

Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
12-31-82	6-17-83	3730'	3727'

Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
3335.7 GR.	Penrose	3518	3668'

Perforations 3518-30 3552-60 3596-3602 3619-23 3642-53
3537-51 3568-76 3607-11 3626-31 3666-70

Depth Casing Shoe 3729'

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12¼"	8 5/8 24"	1146'	650 SX Class "C"
			1st Stage 500 SX "C"
7 7/8"	5½" 15.5" K-55	3729'	2nd Stage 1150 SX
	2 7/8" 8rd 6.5" J-55		

TEST DATA AND REQUEST FOR ALLOWABLE

(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)

OIL WELL

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
7-1-83	7-10-83	Pump	
Length of Test	**Tubing Pressure**	**Casing Pressure**	**Choke Size**
24hrs	30#	30#	-
Actual Prod. During Test	**Oil - Bbls.**	**Water - Bbls.**	**Gas - MCF**
457	38	419 Bbl	15.6

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, 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 Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Howard Hackett
(Signature)

(Title)

OIL CONSERVATION COMMISSION

APPROVED MAR 9 1984, 19

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 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