

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator	Anadarko Petroleum Corporation	Well API No.	30-025-28595
Address	P.O. Box 806 Eunice, NM 88231		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)			
New Well	<input type="checkbox"/>	Change in Transporter of:	
Recompletion	<input checked="" type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	
Change in Operator	<input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	

If change of operator give name and address of previous operator cancel So. Eunice & A. Allen

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Hugh	Well No.	16Y	Pool Name, Including Formation	Penrose, Skelly Grayburg	Kind of Lease	State, Federal or Fee	Lease No.
Location								
Unit Letter	E	1650	Feet From The	North	Line and	965	Feet From The	West
Section	14	Township	22S	Range	37E	NMPM	Lea	County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Texas-NewMexico Pipeline Company	P.O. Box 60028, San Angelo, Tx 76906					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Warren Petroleum	P.O. Box 1589, Tulsa, Okla 74102					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When ?
	D	14	22S	37E	Yes	2-25-89

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

IV. 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.			
1-30-84	2-25-89		4030'		3875'			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
3361 RR	Grayburg		3606		3792'			
Perforations 3606-08, 3653-58, 3678-86, 3714-22, 3754-57, 3760-64, 3810-14, (68 holes 2 SPF)					Depth Casing Shoe			
					4029'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/2"	8 5/8"		1181'		615 SX			
7 7/8"	5 1/2"		4029'		1330 SX			
	2 3/8"		3792'					

V. 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 Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
2-28-89	3-7-89	Pump	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs	35	35	-
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
98	51	47	55

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (prior, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE

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

Signature	Howard D. Hackett	Field Foreman
Printed Name	March 7, 1989	Title
Date	505-394-3184	Telephone No.

OIL CONSERVATION DIVISION

Date Approved	MAR 9 1989
By	ORIGINAL SIGNED BY JERRY SEXTON
	DISTRICT I SUPERVISOR
Title	

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.