1.	NO. OF COPULS SECTIVED DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE IRANSPORTER OIL BROFATOR PROFATION OFFICE Operator Anadarko Petroleum Co Address P. O. Box 2497 Recoon(s) for filing (Check proper box) New We!1 Becompletion	REQUEST	ONSERVATION COMMISSION FOR ALLOWABLE AND INSPORT OIL AND NATURAL G	ip Effecti ve:
П.	Change in Ownership X	FASE	any, P. O. Box 2497, Mid	
	Lease Name Lou Wortham Location Unit Letter F: 21	Vell No. Pool Name, Including Fo 19 Eunice San An 50 Feet From The North Lin nahip 22S Range	dres, South State, Federal	cr Fee Fee
111.	DESIGNATION OF TRANSPORT Nome of Authorized Transporter of Cli Texas-New Mexico Pipel Nome of Authorized Transporter of Cas Texaco Producing, Inc.	ine Company	P. O. Box 60028, San Angelo, Texas 76906 Address (Give address to which approved copy of this form is to be sent) P. O. Box 3000, Tulsa, Oklahoma 74102	
IV.	If well produces oil or liquids, give location of tanks. If this production is commingled with COMPLETION DATA Designate Type of Completio	Cil Well Gas Well	Is gas actually connected? When Yes give commingling order number:	April, 1984 Plug Back Same Res'v. Diff. Res'v.
	Date Spudded Elevations (DF, RKB, RT, CR, etc.)	Date Compl. Ready to Prod.	Total Depth Top Oil/Gas Pay	P.B.T.D. Tubing Depth Depth Casing Shoe
	HOLE SIZE	TUBING, CASING, AND CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
v.	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 allow able for this depth or be for full 24 hours) OIL. WEIL Date of Test Date First New Cil Bun To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.)			
	Length of Test Actual Prod. During Test	Tubing Pressure Oil-Bbls.	Casing Pressure Water-Bbls.	Choke Size Gae-MCF
	GAS WELL Actual Fred. Test-MCF/D Trating Mathed (pitot, back pr.)	Length of Test Tubing Pressure (Shut-in)	Bils. Concentrate/MMCF Coming Pressure (Shut-in)	Grovity of Condensate Choke Size
VI.	CERTIFICATE OF COMPLIANC I hereby certify that the rules and r Commission have been complied w above is true and complete to the	egulations of the Oil Conservation	APPROVED	TION COMMISSION 1985
	Senior Administrative Specialist (Duce) (Duce) (Duce) (Duce) (Duce) (Duce) (Duce) (Duce) (Duce) (Duce) (Duce)		TITLE This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or despense well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111. All soctions of this form must be filled out completely for allow able on new and recompleted wells. Fill out only Sections I. II. III. and VI for changes of owner well name or number, or transporter, or other such change of condition Separate Forms C-104 must be filled for each pool in multiple conductive of the	