

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

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

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

I.

Operator  
Anadarko Petroleum Corporation

Well API No.  
30-025-31658

Address  
P.O. Box 806 Eunice, NM 88231

Reason(s) for Filing (Check proper box)  
New Well ☒ Change in Transporter of:  
Recompletion ☐ Oil ☐ Dry Gas ☐  
Change in Operator ☐ Casinghead Gas ☐ Condensate ☐

☐ Other (Please explain)

If change of operator give name  
and address of previous operator

II. DESCRIPTION OF WELL AND LEASE

Lease Name  
Langlie Mattix Penrose <sup>Sand unit</sup> Tr 10

Well No.  
5

Pool Name, Including Formation  
Langlie Mattix ~~Penrose~~ <sup>SRGN-6B</sup>

Kind of Lease  
State, Federal or Fee

Lease No.

Location  
Unit Letter J : 1390 Feet From The South Line and 1339 Feet From The East Line  
Section 21 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

Address (Give address to which approved copy of this form is to be sent)  
P.O. Box 1910 Midland, Tx 79701

Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐  
Texaco Expl & Prod Inc

Address (Give address to which approved copy of this form is to be sent)  
P.O. Box 3000 Tulsa, OK 74102

If well produces oil or liquids,  
give location of tanks.

Unit  
L

Sec.  
22

Twp.  
22S

Rge.  
37E

Is gas actually connected?  
Yes

When ?  
Completion Date

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<br>X                          | Gas Well | New Well<br>X            | Workover | Deepen                    | Plug Back | Same Res'v | Diff Res'v |
| Date Spudded<br>10-9-92   | Date Compl. Ready to Prod.<br>11-6-92  |          | Total Depth<br>3800'     |          | P.B.T.D.<br>3755'         |           |            |            |
| Elevations (DF, RKB, RT, GR, etc.)<br>3362.2 RKB  | Name of Producing Formation<br>Penrose |          | Top Oil/Gas Pay<br>3512' |          | Tubing Depth<br>3500'     |           |            |            |
| Perforations 3512, 14, 18, 26, 27, 30, 33, 36, 38, 46, 48, 49, 59, 62, 72, 74, 76, 86, 88, 98,<br>3600, 04/06, 20, 21, 39, 40, 52 |  |          |                          |          | Depth Casing Shoe<br>3800 |           |            |            |

TUBING, CASING AND CEMENTING RECORD

|           |                      |           |                             |
|-----------|----------------------|-----------|-----------------------------|
| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT                |
| 17 1/2    | 13 3/8               | 385       | 230 SX 35/65 POZ C 125 SX C |
| 11        | 8 5/8                | 2630      | 50 SX C 600 SX 35/65 C      |
| 7 7/8     | 5 1/2                | 3800      | 230 SX 35/65 POZ C 200 SX A |
|           | 2 7/8                | 3500      | 40/60                       |

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  
11-6-92

Date of Test  
11-6-92

Producing Method (Flow, pump, gas lift, etc.)  
Pump 2 1/2 X 2 X 20 insert

Length of Test  
24 hr

Tubing Pressure  
160

Casing Pressure  
160

Choke Size  
2"

Actual Prod. During Test  
106

Oil - Bbls.  
106

Water - Bbls.  
196

Gas- MCF  
626

GAS WELL

Actual Prod. Test - MCF/D

Length of Test

Bbls. Condensate/MMCF

Gravity of Condensate

Testing Method (pilot, back pr.)

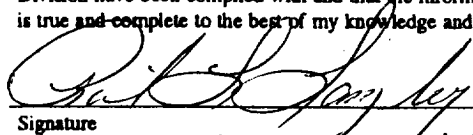
Tubing Pressure (Shut-in)

Casing Pressure (Shut-in)

Choke Size

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  
Rick L. Langley  
Printed Name  
November 11, 1992  
Date

Field Foreman  
Title  
394-3184  
Telephone No.

OIL CONSERVATION DIVISION

Date Approved  
NOV 16 '92

By  
ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR

Title