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DISTRIBUTION SANTA FE		ONSERVATION COMMISSION	Form C-104
FILE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-1
U.S.G.S.		AND	Effective 1-1-65
LAND OFFICE	AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL GAS	CEMILL 2
TRANSPORTER OIL /	4		JUL 2 0 1981
OPERATOR /			
Operator	1	·····	land have been
Anadarko Product	ion Company V	······	den side - al se al se
P. O. Box 67. Lo Reeson(a) for filing (Check proper box)	co Hills, New Mexico 88	255	
New Well	Change in Transporter of:	Other (Please explain) Change lesse no	eme
Recompletion	Oll Dry Gg		
Change in Ownership	Casinghead Gas Conder		
		CASINGHEAD GAS	MUST NOT BE
If change of ownership give name and address of previous owner		FLARED AFTER 9	-9-81
		UNLESS AN EXCEPT	10N TO Fule 306
DESCRIPTION OF WELL AND	Well No. Pool Name, Including F	IS USTAINED EX # 2	- 556
Bradshaw - Com.	. 1 Undesignated	412 HH 4 H	Fee Pee
Unit Letter P ; 660	Feet From The South Lin	e and Feet From The	East
Line of Section 4 Tow	vnehip 195 Range	25E , ммрм, Ed	dy County
DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA		
	or Condensate	Address (Give address to which approved c 511 W. Ohio. P. O. Bo	
Basin, Inc. Name of Authorized Transporter of Cas	linghead Gas a or Dry Gas	Address (Give address to which approved a	x 2297, Midland, Tx 79
None			opy of this form is to be sent;
If well produces oil or liquids,	Unit Sec. Twp. P.ge.	Is gas actually connected? When	
give location of tanks.	P 4 198 25E	No	• ·
If this production is commingled wit COMPLETION DATA	th that from any other lease or pool,	give commingling order number:	
Designate Type of Completio	Oil Well Gas Well		ug Back   Same Res'v. Diff. Res'v
		X	· · · · · · · · · · · · · · · · · · ·
Date Spudded	Date Compl. Ready to Prod.	Total Depth P. 9252	в.т.д. 8739'
1-27-81 Elevations (DF, RKB, RT, GR, etc.)	7-8-81 Name of Producing Formation		0/J7 bing Depth
3517.9 GL	Canyon	-7612 7758	5513'
Perforations			pth Casing Shoe
7758-70 7	788-94		9247*
	TUBING, CASING, AND	CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2"	13-3/8"		Osx + Redimix
12-1/4"	8-5/8"		Osx Circulated 58 sx (CT 5600')
/-//8	4-1/2	724/ 12	J8 SX (CI J600 )
TEST DATA AND REQUEST FO		I	nust be equal to or exceed top allor
Date First New Oil Run To Tanke	Date of Test	Producing Method (Flow, pump, gas lift, et.	c.) . TD'
7-9-81	7-13-81	Pumping	tent Book
Length of Test	Tubing Pressure		N/A (mar )
24 hours Actual Pred. During Test	25#	None Ga	
290	30	260	20 1.1 10
	<u></u>		Populat for
GAS WELL Actual Prod. Teet-MCF/D	Length of Test	Bbls. Condensate/MMCF Gr	avity of Condensate
Testing Method (pitos, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in) Ch	oke Size
CERTIFICATE OF COMPLIANC	L CE		
			1
I hereby certify that the rules and regulations of the Oll Conservation Commission have been complied with and that the information given		APPROVED 3 1 198	<u> </u>
Commission have been complied w above is true and complete to the		BY WUL	resset
-		SUPERVISOR, DI.	SINCL II
		TITLE	
MPL B.		This form is to be filed in comp	
	well	If this is a request for allowable well, this form must be accompanied	for a newly drilled or deepene
		tests taken on the well in accordance	e with RULE 111.
Field F (Tu		All sections of this form must be	e filled out completely for allow
		able on new and recompleted wells. Fill out only Sections I. II. III	and VI for changes of owner
July 17		well name or number, or transporter, or	r other such change of condition
(1/6.			