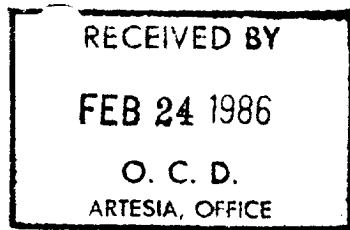


STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator Anadarko Petroleum Corporation ✓	
Address P. O. Drawer 130, Artesia, New Mexico 88210	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership	Designate transporter of Casinghead gas from well to Gas Treating Plant. Ex # 2-765 until 3/22/87
Change in Transporter of: <input type="checkbox"/> Oil <input checked="" type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Bradshaw	Well No. 1	Pool Name, including Formation Penasco Draw - Upper Penn	Kind of Lease Share / Fee / Fee / Fee	Lease No. FEE
Location				
Unit Letter P : 660 Feet From The South Line and 660 Feet From The East				
Line of Section 4 Township 19S Range 25E , NMPM, Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

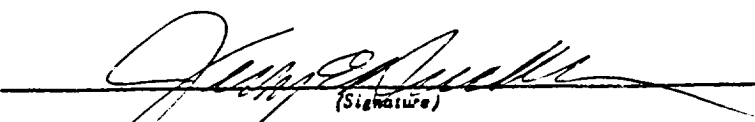
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> J M Petroleum Corporation	Address (Give address to which approved copy of this form is to be sent) 2000 N. Tower, Plaza of the Americas Dallas, Texas 75201	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Anadarko Petroleum Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Drawer 130, Artesia, New Mexico 88210	
If well produces oil or liquids, give location of tanks.	Unit P	Sec. 4
	Twp. 19S	Rge. 25E
Is gas actually connected? Yes		When 10-29-85

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.


(Signature)
Area Supervisor
(Title)
February 7, 1986
(Date)

OIL CONSERVATION DIVISION

APPROVED **FEB 27 1986**, 19_____
BY **F Original Signed By**
Les A. Clements
TITLE **Supervisor District II**

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, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.