

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

OIL CONSERVATION DIVISION

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

MAY 16 '94

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator <i>Anadarko Petroleum Corporation</i>		Well API No. <i>30-015-27893</i>
Address <i>P.O. DRAWER 130, Artesia, NM 88211 806</i>		
Reason(s) for Filing (Check proper box) New Well <input checked="" type="checkbox"/> <input type="checkbox"/> Other (Please explain) Recompletion <input type="checkbox"/> Change in Transporter of: Change in Operator <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>		

If change of operator give name
and address of previous operator

II. DESCRIPTION OF WELL AND LEASE

Lease Name <i>BRADSHAW 14050</i>	Well No. <i>2</i>	Pool Name, Including Formation <i>Undesignated Upper Penn</i>	Kind of Lease State, Federal or <u>Fee</u>	Lease No.
Location Unit Letter <i>0</i> : <i>660</i> Feet From The <i>South</i> Line and <i>1980</i> Feet From The <i>EAST</i> Line Section <i>4</i> Township <i>19S</i> Range <i>25E</i> , NMPM, <i>Eddy</i> 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"/> <i>NAVAJO Refining Company - Trucking Division</i>	Address (Give address to which approved copy of this form is to be sent) <i>P.O. DRAWER 159, Artesia, NM 88210</i>					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> <i>Yates Petroleum Corporation</i>	Address (Give address to which approved copy of this form is to be sent) <i>105 S. 4th St., Artesia, NM 88210</i>					
If well produces oil or liquids, give location of tanks.	Unit <i>P</i>	Sec. <i>4</i>	Twp. <i>19S</i>	Rge. <i>25E</i>	Is gas actually connected? <i>YES</i>	When? <i>5/12/94</i>

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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded <i>4-13-94</i>	Date Compl. Ready to Prod. <i>5-9-94</i>	Total Depth <i>8200</i>		P.B.T.D. <i>8163</i>				
Elevations (DF, RKB, RT, GR, etc.) <i>3533 GL, 3548.8 KB</i>	Name of Producing Formation <i>CANYON</i>	Top Oil/Gas Pay <i>7764</i>		Tubing Depth <i>7708</i>				
Perforations <i>7764-83'; 7794-7805'; 7831-34'; 7838-47';</i>	TUBING, CASING AND CEMENTING RECORD		Depth Casing Shoe <i>8198</i>					
HOLE SIZE <i>24"</i> <i>14 3/4"</i> <i>9 3/4"</i>	CASING & TUBING SIZE <i>20"</i> <i>9 5/8"</i> <i>7"</i>		DEPTH SET <i>38'</i> <i>1253'</i> <i>8198'</i>		SACKS CEMENT <i>Ready Mix</i> <i>920 SX (Circ)</i> <i>1400 SX Cement Top</i> <i>@ 1250'</i>			

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 <i>5/12/94</i>	Date of Test <i>5/13/94</i>	Producing Method (Flow, pump, gas lift, etc.) <i>Flowing</i>	
Length of Test <i>24</i>	Tubing Pressure <i>200 #</i>	Casing Pressure <i>0 #</i>	Choke Size <i>28/64"</i>
Actual Prod. During Test	Oil - Bbls. <i>161</i>	Water - Bbls. <i>382</i>	Gas - MCF <i>388</i>

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate <i>Comp & BK</i>
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

Printed Name

Date

Jerry E. Buckles

Jerry E. Buckles

5/13/94

Area Supervisor

505/677-2411

OIL CONSERVATION DIVISION

Date Approved

MAY 26 1994

By

SUPERVISOR, DISTRICT II

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.