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1000 Rio Diazon Rd., Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

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

RECEIVED

OCT 15 1993

G. C. D.

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

TA

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator FORTSON OIL COMPANY		Well API No. 30-015-27261
Address 301 COMMERCE ST., STE 3301; FT WORTH, TX 76102-4133		
Reason(s) for Filing (Check proper box) New Well <input type="checkbox"/> Other (Please explain) <input checked="" type="checkbox"/> CHANGE OF OPERATOR EFFECTIVE 10-1-93 Recompletion <input type="checkbox"/> Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Change in Operator <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>		
If change of operator give name and address of previous operator BASS ENTERPRISES PRODUCTION CO.; P O BOX 2760; MIDLAND, TX 79702-2760		

II. DESCRIPTION OF WELL AND LEASE

Lease Name BIG EDDY UNIT	Well No. 117	Pool Name, including Formation EAST HERRADURA BEND	Kind of Lease State, Federal or Fee	Lease No. LC-069159-A
Location Unit Letter M : 330 Feet From The SOUTH Line and 330 Feet From The WEST Line Section 25 Township 22S Range 28E, NMJM, EDDY County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil KOCH OIL COMPANY, A DIV OF KOCH IND., INC.	or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) P O BOX 1558; BRECKENRIDGE, TX 76024
Name of Authorized Transporter of Casinghead Gas NONE	or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks. Unit M Sec. 25 Twp. 22S Rge. 28E	Is gas actually connected? NO	When ?

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing Shoe			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT Part 40-3 10-29-93 chy op			

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

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
R. C. HOUTCHENS SR. PRODUCTION CLERK
Printed Name
10-8-93 (915) 683-2277
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved OCT 15 1993

By ORIGINAL SIGNED BY
MIKE WILLIAMS
Title SUPERVISOR, DISTRICT II

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.