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State of New Mexico
Energy, Minerale & Notural Resources Department
Instructions on back District 1 PO Bax 1980, Hobbs, NM 88241-1980 District 11 OIL CONSERVATION DIVISION DEST. Submit to Appropriate District Office PO Drawer DD, Artesla, NM 98211-0719 PO Box 2088 Santa Fe, NM 87504-2088 District 111 1000 Rlo Brame Rd., Arice, NM \$7410 **AMENDED REPORT** PO Box 2088, Santa Fe, NM 17504-1081 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT Operator name and Address OURID Number Bass Enterprises Production Co. 001801 P 0 Box 2760 Reseas for Filing Code Midland, Tx 79702-2760 Eff. 2-1-95 Pool Name 1 Pool Code AM Number 30 - 0 96047 15-27537 <u>Delaware, SW</u> Frapetty Code Well Number <del>001786-</del> 1796 Poker Lake Unit (LC-061705-B) 10 Surface Location Towarblp Range Loi.ldu Feet from the North/South Line | Feet from the East/West Inc Ul er lot no. Section Eddy 660 660 West 19 South 11 Bottom Hole Location North/South Kne East/West Luc Lot Ida Feet from the Feet from the Countr UL or lot no. Section Township Range 11 Lee Code | 11 Froducing Method Code 14 Gas Connection Date 16 C-129 Permit Number " C-129 Effective Date 17 C-119 Expiration Date III. Oil and Gas Transporters

"Transporter
OGRID "Trans ii FOD 11 O/O H POD ULSTR Location 1 Transporter Name and Description 2815610 2806660 0 E.O.T.T. Energy Pipeline Co P O Box 4666 037480 Houston, Tx 77210-4666 A-Sec. 25, 24S, 30E Sid Richardson Gasoline Co. 201 Main St., Ste. 3000 Ft Worth, Tx 76102 020809 2806662 G A-Sec. 25, 24S, 30E Produced Water H POD ULSIR Location and Description POD A-Section 25, T24S, R30E Well Completion Data II Spud Date " Ready Date 27 711 M PRID 27 Perforations ii Depth Bet H Hale Size 11 Casing & Tubing Size Bucks Cement I. Well Test Data M Gas Dellvery Date Date New Oil M Test Date " Test Laugth M Thg. Pressure " Cog. Pressure " Choke Size " ou " Gas 4 Waler " AOF " Test Method t hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my OIL CONSERVATION DIVISION knowledge and bellef, ORIGINAL SIGNED BY TIM W. GUM Signature: Approved by: DISTRICT II SUPERVISOR Printed name: R.C. Houtchens Approval Date: Senior Production Clerk FEB 1 0 1995 11hone: (915) 683-2277 D. 12:30-95 4 If this is a change of operator fill in the OGRID number and name of the previous operator Previous Operator Signature Printed Name Title Data

## New Mexico Oil Conservation Division C-104 Instructions

IF THIS IS AN AMENDED REPORT, CHECK THE BOX LABLED "AMENDED REPORT" AT THE TOP OF THIS DOCUMENT		22,	Tile ULBTR location of this POD if it is different from the well completion location and a short description of the POD
Report all gas volumes at 15,025 PSIA at 60°. Report all oil volumes to the nearest whole barrel.		23.	The POD number of the storage from which water is moved.
A request for allowable for a newly drilled or deepened well must be accompanied by a tabulation of the deviation tests conducted in accordance with Rule 111.			from this property. If this is a new well or recompletion and this POD has no number the district office will assign a number and write it here.
All sections of this form must be filled out for allowable requests on new and recompleted wells.		24.	The ULSTR location of this POD If it is different from the well completion location and a short description of the POD (Example: "Battery A Water Tank", "Jones CPD Water
Fill out only sections I, II, III, IV, and the operator certifications for changes of operator, property name, well number, transporter, or other such changes.		25.	MO/DA/YR drilling commenced
A separate C-104 must be filed for each pool in a multiple		28.	MO/DA/YR this completion was ready to produce
completion.		27,	Total vertical depth of the well
improperly illied out or incomplete forms may be returned to operators unapproved.		28.	Plugback vertical depth
1.	Operator's name and address	29.	Top and bottom perforation in this completion or casing shoe and TD if openhole
2.	Operator's OGRID number. If you do not have one it will be assigned and filled in by the District office.	30.	Inside diameter of the well bore
3.	Research for filling code from the following table:	31.	Outside diameter of the casing and tubing
	NW New Wall RC Recompletion CH Change of Operator	32,	Depth of casing and tubing. If a casing liner show top and bottom.
	AO Add oil/condensate transporter CO Change oil/condensate transporter AG Add gas transporter	33.	Mismbon of college
		•	called of called tracks of called per casing string
	RT Request for test allowable (Include volume		lowing test data is for an oil wall it must be from a test ted only after the total volume of load oil is recovered.
	If for any other reason write that reason in this box.	34.	MO/DA/YR that new oil was first produced
4.	The API number of this well	35.	MO/DA/YR that gas was first produced into a pipeline
Б.	The name of the pool for this completion	36.	MO/DA/YR that the following test was completed
6.	The pool code for this pool	37.	Length in hours of the test
7.	The property code for this completion	38.	Flowing tuhing pressure a cit walls
θ.	The property name (well name) for this completion	**	Bnut-in tubing pressure - gas wells
9.	The well number for this completion	39.	Flowing casing pressure - oil wells Shut-in casing pressure - gas wells
10,	The surface location of this completion NOTE: If the	40.	Diameter of the choke used in the test
	for this location use that number in the 1th	41.	Barrels of oil produced during the test
	Official and the OCD unit letter.	42.	Barrels of water produced during the test
11,	The bottom hole location of this completion	43.	MCF of gas produced during the test
12,	Lease code from the following table:	44.	Gas well calculated absolute open flow in MCF/D
1	S State P Fee	46.	The method used to test the well:
	J Jicarilla N Navajo		F Flowing Pumping
	U Ute Mountain Ute	:	8 Swahhing
10	Other Indian Tribe	40	If other method please write it in.
13,	The producing method code from the following table:  F Flowing P Pumping or other artificial lift	46.	The eignature, printed name, and title of the person authorized to make this report, the date this report was signed, and the telephone number to call for questions about this report
14.	MO/DA/YR that this completion was first connected to a gas transporter	47.	The previous operator's warmen to
15.	The permit number from the Dietrict approved C-129 for this completion		and title of the previous operator's representative authorized to verify that the previous operator no longer operates this completion, and the date this report was signed by the research.
18,	MO/DA/YR of the C-129 approval for this completion		eigned by that person
17.			
	MO/DA/YR of the expiration of C-129 approval for this completion		
18,	The gas or oil transporter's OGRID number		one of the second of the secon
19,	Name and address of the transporter of the product	,	
20.	The number assigned to the DOD town at Last		
	will be transported by this transporter. If this is a new well or recompletion and this POD has no number the district office will assign a number and write it here.		
<b>21.</b>	Product code from the following table:	•	
	Q Gas	Same Garage	well that the
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