f	NO. OF COPIES RECE							
		<del>   </del>						
	DISTRIBUTIO			NSERVATION COMMISSION				
	SANTA FE	<b>├</b> - <del>    </del>	REQUEST F	OR ALLOWABLE				
	FILE			AND				
	U.S.G.S.		AUTHORIZATION TO TRAI	NSPORT OIL AND NATUR				
	LAND OFFICE							
	IRANSPORTER	OIL GAS						
	OPERATOR							
	PRORATION OFF	CE						
I.	Operator	1-1-1						
	Basin F	uels, Ltd.						
		0.11 0.00 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						
	300 W.	Arrington.	Arrington, Suite 300, Farmington, NM 87401 Check proper box) Other (Please explain					
	Reason(s) for filing (		Change in Temperature of	Ome: () tease express				
	New Well	$\bowtie$	Change in Transporter of:					
	Recompletion	H	Oil Dry Gas	77				
	Change in Ownership		Casinghead Gas Condens	rate [ ]				
	If change of owners and address of previous	nip give name						
	and address of previ							
11	DESCRIPTION OF	F WELL AND I	LEASE					
	Lease Name	11325 1110	Well No. Pool Name, Including Fo	rmation Kind o				
	Star		6 Franciscian	lake M.V. State,				
	Location		- 1 Tranciscian					
			O - South	. 220 =				
	Unit Letter M	;;	O Feet From The South Line	and <u>330</u> Feet				
		_	201	T.I. NIMENA B				
	Line of Section	7 Town	nship 20N Range 5	, NMPM,				
				_				
III.	DESIGNATION OF	TRANSPORT	ER OF OIL AND NATURAL GAS	Address (Give address to which				
	Name of Authorized	Fransporter of Oil	or Condensate					
	Merit 0	il Corporat	ion	300 W. Arrington, S				
	Name of Authorized	ransporter of Cast	inghead Gas or Dry Gas	Address (Give address to which				
	None							
	If well produces oil o	- Manids	Unit Sec. Twp. Rge.	Is gas actually connected?				
	give location of tank		M	No				
			h that from any other lease or pool,	rive commingling order number				
***	If this production is COMPLETION DA		that from any other lease of poor,	ive commissing order manner				
14.				New Well Workover Deep				
	Designate Typ	e of Completion	$n = (X)$ $\chi$	X				
	Date Spudded		Date Compl. Ready to Prod.	Total Depth				
	3-18-80		5-17-80	3001				
	Elevations (DF, RKB		Name of Producing Formation	Top Oil/Gas Pay				
		1		2090				
	6730 GR & 67	04 KD	Menefee	1 4030				
	Perforations							
	2091-21	05 and 23	23-2328	SEMENTING DECORD				
			CEMENTING RECORD					
	, HOLE	SIZE	CASING & TUBING SIZE	DEPTH SET				
	12 1/4		8 5/8	90				
	6 1/4		4 1/2	2848				
			•					
			2 3/8	2360				
•1	TEST DATA AND	PEOUEST EC	RALLOWABLE (Test must be of	ter recovery of total volume of l				
٧.	OIL WELL	REQUESTIC	able for this de	oth or be for full 24 hours)				
	Date First New Oil F	un To Tanks	Date of Test	Producing Method (Flow, pump				
			5-22-80	Pump				
	5-17-80 Length of Test		Tubing Pressure	Casing Pressure				
	į.	_	25	25				
	24 hour	D Test	Oil-Bbls.	Water-Bble.				
	<u>.</u>			228				
	1294_bb1	<u>s</u>	66					
	•							
	GAS WELL							
	Actual Prod. Test-N	est-MCF/D Length of Test Bbls. Condensate/MMCF						
				Am 4 4 1				
	Testing Method (pito	t, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)				

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

	U.S.G.S.  LAND OFFICE  IRANSPORTER  OPERATOR  PRORATION OFF	OIL GAS	AUTHORIZATION TO TRA	NSPORT OIL AND I	NATURAL GA	.\$	B.K.				
•	Operator										
	Basin F	uels, Ltd.									
	300 W. Reason(s) for filing (	Arrington, Suite 300, Farmington, NM 87401									
	New Well	Change in Transporter of:									
	Recompletion  Change in Ownership	H	Oil Dry Gas Casinghead Gas Condensate								
ļ											
	If change of owners and address of previous										
II.	DESCRIPTION O	F WELL AND	LEASE		Vind of Loose		Lease No.				
	Lease Name    Well No.   Pool Name, Including Formation   Kind of Lease					or Fee Fe	NMOEEEOSOA				
	Location				· · · · · · · · · · · · · · · · · · ·						
	Unit Letter M	; <u>6</u>	60 Feet From The South Lin	• and330	Feet From Th	• <u>West</u>					
	Line of Section	7 то	wnship 20N Range	5W , NMPN	McKin]	ey	County				
111	DESIGNATION OF	 F TRANSPOR	TER OF OIL AND NATURAL GA	.s							
	Name of Authorized	ransporter of Oi	or Condensate	Address (Give address			is form is to be sent) armington, NM 87401				
	Merit 0	il Corpora ransporter of Co	tion singhead Gas or Dry Gas	Address (Give address	to which approve	d copy of the	is form is to be sent)				
	None		Tue Pag	Is gas actually connect	ted? When						
	If well produces oil of give location of tank	r liquids, s.	Unit Sec. Twp. Rge.	No		Unknown	1				
			ith that from any other lease or pool,	give commingling orde	r number:		-				
IV.	COMPLETION DA		Oil Well Gas Well	New Well Workover	Deepen	Plug Back	Same Res'v. Diff. Res'v.				
	Designate Typ	e of Completi		Total Depth		P.B.T.D.	<u> </u>				
	Date Spudded 3-18-80		Date Compl. Ready to Prod. 5-17-80	3001		2808_					
	Elevations (DF, RKE	, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay		Tubing Dept					
	6730 GR & 67	34 KB	Menefee	1 2090		236 Depth Casin					
	1	2091-2105 and 2323-2328									
	HOLE	517F	TUBING, CASING, AND CASING & TUBING SIZE	DEPTH S	•	SA	ACKS CEMENT				
	12 1/4	J122	8 5/8	90		75 sks	Class B + 2% CaCl <sub>2</sub> class "B" + 0.5%				
	6 1/4_		4 1/2	2848		225 SKS D-65 +2	2% CaCl2				
			2 3/8	2360							
V.		REQUEST F	OR ALLOWABLE (Test must be a able for this de	epth or be for full 24 how	·*)		qual to or exceed top allow-				
	OIL WELL Date First New Oil F	un To Tanks	Date of Test	Producing Method (Flo	w, pump, gas lift	, etc.)					
	5-17-80 Length of Test		5-22-80 Tubing Pressure	Pump Casing Pressure		Choke Size					
	24 hour		25	25 ·		nene					
	Actual Prod. During		O:1-Bbls.	228		26					
	294 bb1	<u> </u>	1 00			JU	Man.				
	GAS WELL Actual Prod. Test-N	CF/D	Length of Test	Bbls. Condensate/MMC	CF	Granitor 6	Gendensate				
	Actual Piod. 1001					Chok Size	11ST 3				
	Testing Method (pitt	t, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shu	t-1B )	Choresize	- Control of the Cont				
VI.	CERTIFICATE O		OIL CONSERVATION COMMISSION  APPROVED								
		laas samaliad	regulations of the Oil Conservation with and that the information given	11	APPROVED CHANGE						
	above is true and	complete to the best of my knowledge and belief.			CISPERVICOR DISTRICT TO S						
	1										
	(Istan				This form is to be filed in compliance with RULE 1104.  If this is a request for allowable for a newly drilled or deepened						
	Jack D.	Cook (Sign	nature)	well, this form must be accompanied by a tabulation of the desire taken on the well in accordance with RULE 111.							
	Agent	/T	itle)	All sections of this form must be filled out completely for allowable on new and recompleted wells.  Fill out only Sections I. H. III, and VI for changes of owner, the complete of the complete of the complete of condition.							
	June 19	. 1980									
		(0	ate)	Separate For	ms C-104 must	be filed f	for each pool in multiply				
				completed wells.							