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5-000 Aztec, 1-0505 Durango
NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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

Operator BCO, Inc.	
Address 135 Grant, Santa Fe, New Mexico 87501	
Reason(s) for filing (Check proper box)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input checked="" type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	

If change of ownership give name
and address of previous owner

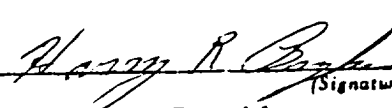
Lease Name Campos		Well No. 1	Pool Name, including Formation Lybrook Gallup	Kind of Lease Federal State, Federal or Fee	Lease No. SF-078272-A
Location					
Unit Letter J ; 1,650 Feet From The South Line and 1,650 Feet From The East					
Line of Section 10 Township 23N Range 7W , NMPM, Rio Arriba County					

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> BCO, Inc.		Address (Give address to which approved copy of this form is to be sent) 135 Grant, Santa Fe, New Mexico 87501			
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Grace Petroleum		Address (Give address to which approved copy of this form is to be sent) Three Park Central, Suite 200 1515 Arapahoe, Denver, Colorado 80202			
If well produces oil or liquids, give location of tanks.	Unit J	Sec. 10	Twp. 23N	Rge. 7W	Is gas actually connected? When Yes Early 1960's

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

V. COMPLETION DATA--See original report									
Designate Type of Completion - (X)									
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.						
Elevations (DF, RKB, RT, CR, 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						

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL--See original report				(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 Tanks	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		Bbls. Condensate/MMCF				Gravity of Condensate	
Actual Prod. Test-MCF/D	Length of Test	Casing Pressure (Shut-in)	Choke Size				
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)						

VI. CERTIFICATE OF COMPLIANCE	
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.	
 (Signature) President (Title) 1-24-80 (Date)	

OIL CONSERVATION COMMISSION JAN 25 1980	
APPROVED	19
BY	Original Signed by FRANK T. CHAVEZ
TITLE	SUPERVISOR DISTRICT # 3
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.	