	wo of congressives	5 OCC Aztec 1	HLB 1 DS	1 SC	8 copie	:S		
	\$15 F F F F F F F F F F F F F F F F F F F	NEW MEXICO OIL	CONSERVATION COM	MISSION .	Porm C =104			
	S/NTA, FE	REQUEST	FOR ALLOWABLE		Supersedes O Effective 1-1;	ld C-10\$ and C-17: 65		
	U.S.G.S.	AUTHORIZATION TO TR	Vind	STEETHOAL CAS	0 1)		
	LANO DI FICE	AUTHORIZATION TO TR	ANSPORT UIL AND	NATURAL GAS	L K			
	OIL	1			0)_1	•		
	TRA CONTER GAS				No.			
	OPEHATOR	1						
1.	PROBATION OFFICE							
	Charator							
	BCO, Inc.			•				
	Address	2750	1					
	135 Grant, Santa Reason(s) for filing (Check proper box	Fe, New Mexico 8750	Other (l'lea	se explain)				
	tlew Well	Change in Transporter of:	Ower (V					
	Recompletion XX	Cil Dry G	as [
	Change in Ownership	Casinghead Gas Conde	nsate 📗					
			<u> </u>					
	If change of ownership give name and address of previous owner							
II.	DESCRIPTION OF WELL AND	Well No.: Pool Name, Including I	Formation	Kind of Lease		Lease No.		
	Lease Name	† I		State, Federal or Fe	e State	LG 3748		
	State H	3 Lybrook Gall	шР		State			
	Location		. 000	P P Th.	1.7			
	Unit Letter M; 990	Feet From The S Li	ne and	Feet 7 rom The	W			
	Line of Section 2 Township 23N Range 7W , NMPM, Rio Arriba County							
	Eme of section 2	2311						
!1.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL G	AS			,		
	Name of Authorized Transporter of Oil	or Condensate	Andress (Give addres:	s to which approved co	_			
	BCO, Inc.		135 Grant,	Santa Fe, New	Mexico &	37501		
	tiame of Authorized Transporter of Casinghead Gas 📉 💮 or Dry Gas 🦳		!		_			
	BCO, Inc.	Tive Boo	Is gas qually connec	Santa Fe, New	Mexico C	7,701		
	If well produces oil or liquids,	Unit Sec. Twp. P.ge. M 2 23N 7W	Yes	11-6-	-80			
	give location of tanks.	<u> </u>	<u>. i</u>					
	If this production is commingled wit	th that from any other lease or pool,	give comminging ord	er number: Cas	se 7279 Ord	ler R-6/19		
٧.	COMPLETION DATA	Oil Well Gas Well	New Well Workover	Deepen Plug	Back Same Re	siv. Diff. Resiv.		
	Designate Type of Completic	t	1 X	X	<u> </u>			
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	i	T.D.			
	9-14-80	7-15-81	6545		ı <u>53</u>			
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oll/Gas Pay	•	ng Depth			
	6968 GR	Gallup	5364 Gallup		350 h Casing Shoo			
	Perforations 5602, 5590, 5		i '					
	5490, 5487, 5484, 5454, 5372, 5368, 5364 6543 TUBING, CASING, AND CEMENTING RECORD							
	HOLE SIZE	CASING & TUBING SIZE	DEPTH		SACKS CE	MENT		
	12 1/4	8 5/8 23.0 #	296		200			
	7 7/8	4 1/2 11.6 #	6543		1400			
	4 1/2	2 3/8 4.7 #	6350					
			<u> </u>					
v.	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be	after recovery of total vo	lume of load oil and mu	st be equal to or	exceed top allow-		
	OIL WELL	able for this a	epin or be jor jun 24 not	ow, pump, gas lift, etc.				
	Date First New Oil Run To Tanks	Date of Test	1					
	7-15-81 Gallup Length of Test	7-29-81 Tubing Pressure	Gas Lift Casing Pressure	Chol	e Size			
	24 hrs.	780 to 740	905 to 770	3,	4			
	Actual Pred, During Test	Oil-Bbls.	Water-Bble.		MCF			
	Gallup	32 AFILE	0	1:	30			
			1					
	GAS WELL	/ GLUL 101						
	Actual Fred. Test-MCF/D	Length of Tet	Bills. Condensate/MM	CF Gran	ity of Condensate	•		
		Length of Tet	Claing Pressure (Shr	rt-in) Chal	e Size			
	Testing Method (pitot, back pr.)	Tubing Provide (Shut-19)N. 3	7					
		Ois Disis	CII	CONSERVATION	I COMMISSIO)N		
Л.	CERTIFICATE OF COMPLIANO	LE		JOHJERVATIO				
	I hereby certify that the rules and regulations of the Oil Conservation		APPROVED AUG. 79- 1981					
	Commission have been complied with and that the information given !		Original Signed by FRANK T. CHAVEZ					
	above is true and complete to the	beat of my knowledge and belief.	BY	SUPERVISOR DISTRICT # 3				
		•	TITLE					
	,	This form is to be filed in compliance with RULE 1104.						
	Harry R Bal		er allo as a sequent for allowable for a newly drilled or deepened					
	(Signatural)		Il want this form must be accompanied by a tabulation of the deviation					
		Harry R. Bigbee, President			tests taken on the well in accordance with MULE 111. All sections of this form must be filled out completely for allow-			
	(Title)		able on new and recompleted wells.					
	8-6-81		Ettl out only	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.				
	(Do	ect C-104 dated 7-28-81	well name or numb	per, or transporter, or ms C-104 must be 1	iled for each	pool in multiply		
	rkeplaces incorre	:CL 0-104 dated /-20-01	completed wells.			. , ,		