NEW MEXICO OIL CONSERVATION COMMIS Supersedes Old C-104 and C-110 REQUEST FOR ALLOWABLE SANTAFE Liffective 1-1-65 AHD FILE AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS u.s.c.s. LAND OF FICE IRA: "ORTER OPERATOR PROBATION OFFICE BCO, Inc. Reason(s) for filing (Check proper box) Other Weuse ex ·AUGI O laci XX Dry Gas Recompletion U. S. C. OLOGICAL SULVEY Condensate Casinghead Gas Thorage in Ownership FARIVINGTON, N. M. If change of ownership give name and address of previous owner. Kind of Lease FEDERAL . Lease No. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including Formation F-078272 State, Federal or Fee Lybrook Gallup 8 DUNN 600 Feet From The \_ Feel From The N Line and : 1980 Unit Letter E Rio Arriba 7W\_\_\_ Township 23N Parige Line of Section DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Acciess (Give address to which approved copy of this form is to be sent) or Condensate None of Authorized Transporter of On XX 135 Grant Avenue, Santa Fe, New Mexico 87501
Address (Give address to which approved copy of this form is to be sent) BCO, Inc.
Name of Authorized Transporter of Casinghead Gas XX or Dry Gos Santa Fe, New Mexico 87501 135 Grant Avenue, BCO, Inc. gas actually connected? Twp. F.ge. Unit Sec. If well produces oil or liquids, give location of torks. <u>7-23-81</u> <u>; 9</u> 23N: Yes F. give commingling order number: If this production is commingled with that from any other lease or pool, No COMPLETION DATA Some Resty, Diff. Resty Plue Bock New Well Designate Type of Completion - (X) Gas Well X Total Depth P.B.T.D. Date Compl. Ready to Prod. Date Spudded 5902 5842 8-4-81 7-16-81 Tubing Depth Top Oil/Gas Pay Name of Producing Formation Elevations (DF, RAB, RT, CR, etc., 5754 Depth Casing Shoo 5510 Lybrook Gallup Perforations One shot at 5754, 5746, 5735, 5712, 5688, 5674, 5650, 5644, 5895 5632, 5629, 5626, 5602, 5540, 5520, 5515, 5510 TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT DEPTH SET CASING & TUBING SIZE HOLE SIZE 150 sacks 212 8 5/8 23.0 12 1/4 975 sacks 5894 10.5 4 1/2 7 7/8 5754 2 3/8 4 1/2 (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) TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Producing kiethod (Flow, pump, gas lift, etc.) Date of Test Date First New Cil Run To Tonks flow 8-6-81 8-4-81 Cosing Pressure Tubing Pressure open Length of Test 280 50 Water - Bbis. Oil-Bbls. Actual Prod. During Test 60 frac 120 8-6-81  $C()_{i,i}$ GAS WELL Bble. Cordensale/MMCF Length of Test Actual Prod. Test-MCF/D Choke Size Cosing Pressure (Shut-in) Tubing Pressue (Shut-in) Testing Method (pitot, back pr.) OIL CONSERVATION COMMISSION CERTIFICATE OF COMPLIANCE AUG 21 1981 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. Original Signed by FRANK I. CHAVEZ **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 MULE 111. All sections of this form must be filled out completely for allowable on new and recompleted wells.

Harry R. Bigbee, President

8-6-81

Fill out only Sections I. II. III, and VI for changes of owner.

OPERATOR continues, or transporter, or other such change of condition.