

DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATION	
PROMOTION OFFICE	

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-1
Effective 1-1-65

BK.

Operator BCO, Inc.	
Address 135 Grant Avenue, Santa Fe, New Mexico 87501	
Reason(s) for filing (Check proper box)	
New Well <input checked="" 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 type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name and address of previous owner _____

DESCRIPTION OF WELL AND LEASE				
Lease Name DUNN	Well No. 6	Pool Name, including Formation Lybrook Gallup	Kind of Lease FEDERAL State, Federal or Fee	Lease No. \$F-078272
Location				
Unit Letter F	: 2120	Feet From The N	Line and 2130	Feet From The W
Line of Section 9	Township 23N	Range 7W	NMPM, Rio Arriba	County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS				
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)			
BCO, Inc.	135 Grant Avenue, Santa Fe, New Mexico 87501			
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)			
BCO, Inc.	135 Grant Avenue, Santa Fe, New Mexico 87501			
If well produces oil or liquids, give location of tanks.	Unit E	Sec. 9	Twp. 23N	Rge. 7W
			Is gas actually connected? Yes	When 7-23-81

If this production is commingled with that from any other lease or pool, give commingling order number: No

COMPLETION DATA									
Designate Type of Completion - (X)		Oil Well <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded 7-6-81	Date Compl. Ready to Prod. 7-28-81		Total Depth 5903		P.B.T.D. 5809				
Elevations (DF, RKB, RT, GR, etc.) GR 7218	Name of Producing Formation Lybrook Gallup		Top Oil/Gas Pay 5251		Tubing Depth 5768				
Perforations 5768, 5756, 5735, 5708, 5694, 5678, 5655, 5652, 5649, 5621, 5554, 5540, 5534, 5528, 5251				Depth Casing Shoe 5865					
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4		8 5/8 23.0		215		140 sacks			
7 7/8		4 1/2 10.5		5864		1075 sacks			
4 1/2		2 3/8 3.7		5768					

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (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)

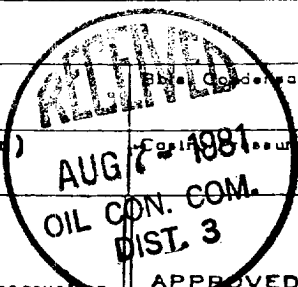
Date First New Oil Run To Tanks 7-28-81	Date of Test 8-6-81	Producing Method (Flow, pump, gas lift, etc.) Gas Lift	
Length of Test 24 hours	Tubing Pressure 440 to 390	Casing Pressure 650 to 520	Choke Size 3/4
Actual Prod. During Test 8-6-81	Oil-Bbls. 49	Water-Bbls. 5	Gas-MCF 108

GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Specific Gravity/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

CERTIFICATE OF COMPLIANCE OIL CONSERVATION COMMISSION

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.

Harry R. Bigbee
(Signature)
Harry R. Bigbee, President
(Title)
8-6-81
(Date)



APPROVED
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 deepened 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 which the well is to be drilled.