

DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION 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-
Effective 1-1-85

Operator BCO, Inc.	
Address 135 Grant Avenue, Santa Fe, New Mexico 87501	
Reason(s) for filing (Check proper box)	Other (Please explain)
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. 12	Pool Name, Including Formation Dakota (Undesignated Graneros)	Kind of Lease State, Federal or Fee Federal	Lease No. SF-07827
Location Unit Letter 0 : 990 Feet From The South Line and 1800 Feet From The East Line of Section 3 Township 23North Range 7 West 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, NM 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, NM 87501
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Pgs. Is gas actually connected? When
I 3 23N 7W	Yes * Nov. 1, 1985

If this production is commingled with that from any other lease or pool, give commingling order number: R 6929

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't. <input type="checkbox"/> Diff. Res't. <input type="checkbox"/>		
Date Spudded June 9, 1985	Date Compl. Ready to Prod. September 10, 1985	Total Depth 6477' 6-600	P.B.T.D. 6475'
Elevations (DF, RKB, RT, GR, etc.) 7020 GR	Name of Producing Formation Dakota (Undesignated Graneros)	Top Oil/Gas Pay 6342	Tubing Depth 6369'
Perforations One 3-1/8" .32 diameter Select fire shot at 6387, 6360, 6358, 6356, 6354, 6352, 6350, 6348, 6342			Depth Casing Shoe 6596'
TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/2"	8-5/8" 24#	300' 307	180 sacks Class B
7-7/8"	4 1/2" 11.60#	6597'	1950 Sacks Class H
4"	2-3/8" 4.7#	6369'	None

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 August 5, 1985	Date of Test August 19, 1985	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 24 hours	Tubing Pressure 500	Casing Pressure 510	Choke Size 24/64
Actual Prod. During Test August 19, 1985	Oil-Bbls. 20	Water-Bbls. 0	Gas-MCF 60

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shot-in)	Casing Pressure (Shot-in)	Choke Size

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.

* First deliveries to be made when El Paso completes repairs to Blanco Gas Pump

Signature Elizabeth B. Keck	Signature [Signature]
Comptroller (Title)	Supervisor (Title)
October 30, 1985 (Date)	

OIL CONSERVATION COMMISSION APPROVED OCT 31 1985	
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 multiple completed wells.