

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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LAND OFFICE		
TRANSPORTER	OIL	
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OPERATOR		
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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501Form C-104
Revised 10-01-78
Format 08-01-83
Page 1

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AUG 01 1988

OIL CON. DIV.
DIST. 3REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Dunn	14	Lybrook Gallup	State, Federal or Fee Federal	SF-078272
Location				
Unit Letter	L	2310 Feet From The	South	Line and 820 Feet From The West
Line of Section	10	Township	23 North	Range 7 West, NMPM, Rio Arriba County

III. 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, 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, Santa Fe, NM 87501
If well produces oil or liquids, give location of tanks.	Unit, Sec., Twp., Rge.
F 10 23 N 7 W	Is gas actually connected? When

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

Elizabeth B. Keeshan

(Signature)

Vice President

(Title)

7/29/88

(Date)

OIL CONSERVATION DIVISION AUG 01 1988

APPROVED _____, 19

BY _____ Original Signed by FRANK T. CHAVEZ

SUPERVISOR DISTRICT 55 E

TITLE _____

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.

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'tv.	Diff. Res'tv.
		XX		XX					
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.				
6/10/88	6/20/88		6975		5968'				
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth				
7441 GR.	Gallup		5762		5894'				
Perforations One 0.39" select fire shot at 5762; 5766; 5770; 5774; 5778; 5790; 5880; 5882; 5884; 5886; 5898						Depth Casing Shoe			
						6971'			
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
12 1/4"	8 5/8"		233'		155				
7 7/8"	4 1/2"		6972'		1380				
4 1/2"	2 3/8"		5894'						

V. TEST DATA AND REQUEST FOR ALLOWABLE (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.)	
July 20, 1988	July 27, 1988	Gas lift	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hours	310	555	Open
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
13 BO	13	2 (recovered frac water)	65

GAS WELL

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