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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

5 OCC Aztec; 1 BLM Farmington; 1 HLB; 1 DS
NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND

8 copies

Form C-104
Supersedes Old C-104 and C-1
Effective 1-1-85

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED

JUL 16 1984

Operator BCO, Inc.		OIL CON. DIV.	
Address 135 Grant Avenue, Santa Fe, New Mexico 87501		DIST. 3	
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:	Run and cement 2 7/8" tubing	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/>	inside of 4 1/2" casing.	
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	pool change	
	Dry Gas <input type="checkbox"/>		
	Condensate <input type="checkbox"/>		

If change of ownership give name
and address of previous owner

I. DESCRIPTION OF WELL AND LEASE

Lease Name Federal B	Well No. 5	Pool Name, including Formation Alamito Gallup	Kind of Lease State, Federal or Fee Federal	Lease No. NM-6682
Location				
Unit Letter D : 860 Feet From The North Line and 790 Feet From The West				
Line of Section 34 Township 23 North Range 7 West, NMPM, Sandoval County				

II. 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	Sec.	Twp.	Rge.
	L	34	23N	7W
				Is gas actually connected? Yes
				When 12-2-78

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

V. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
	XXXX		XXX	XXX				
Date Spudded 11/2/78	Date Compl. Ready to Prod. 12/1/78		Total Depth 5350		P.B.T.D. 5290			
Elevations (DF, RKB, RT, GR, etc.) 6911 GR	Name of Producing Formation Gallup		Top Oil/Gas Pay 4978		Tubing Depth 5202			
Perforations One 3 1/8" shot at: 4978, 4983, 4988, 5098, 5102, 5105, 5118, 5122, 5132, 5140, 5148, 5162, 5166, 5180, 5198, 5202					Depth Casing Shoe 5336			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4"	8 5/8" 24.0#		131		100			
7 7/8"	4 1/2" 10.5#		5344		175			
4 1/2"	2 7/8" 6.5#		4645		225			
2 7/8"	1 1/2" 2.75#		5202		None			

V. 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 12-1-78	Date of Test Well was shut in until spring due to freezing weather - 6/22/79	Producing Method (Flow, pump, gas lift, etc.) Gas lift	
Length of Test 24 hours	Tubing Pressure 150	Casing Pressure	Choke Size Open
Actual Prod. During Test 6/22/79	Oil-Bbls. 19	Water-Bbls. 0	Gas-MCF 114

GAS WELL

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

VI. 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.

Harry R. Bayl
President
July 12, 1984

OIL CONSERVATION COMMISSION

APPROVED JUL 16 1984. 19
BY Original Signed by FRANK T. CHAVEZ
SUPERVISOR DISTRICT # 3

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.