

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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TRANSPORTER	OIL	
	GAS	
OPERATOR		
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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

3130/10
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SEP 24 1987
Form C-104
Revised 10-05-78
Permit 08-03-83
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REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator
BCO, Inc.

Address
135 Grant, Santa Fe, NM 87501.

Reason(s) for filing (Check proper box)

☒ New Well

☐ Recompletion

☐ Change in Ownership

Change in Transporter of:

☐ Oil

☐ Casinghead Gas

☐ Dry Gas

☐ Condensate

Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Alamito Unit	Well No. 2	Pool Name, including Formation Alamito Gallup	Kind of Lease State, Federal or Fee State	Lease No. LG3924-3
Location				
Unit Letter N : 770 Feet From The South Line and 1820 Feet From The West				
Line of Section 32 Township 23N Range 7W, NMPM, Sandoval 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. Is gas actually connected? When
	N 32 23N 7W No. Will be when well quits making nitrogen.

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)
September 23, 1987
(Date)

OIL CONSERVATION DIVISION
SEP 18 1987
APPROVED _____, 19____
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 allow-
able 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 X	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 8/14/87	Date Compl. Ready to Prod. 9/18/87	Total Depth 5100			P.B.T.D. 5078				
Elevations (DF, RKB, RT, GR, etc.) 6820 GR	Name of Producing Formation Gallup	Top Oil/Gas Pay 4736			Tubing Depth 4986				
Perforations 4888, 4910, 4928, 4945, 4985, 5014, 4736, 4740, 4850, 4855, 4860, 4867						Depth Casing Shoe 5096			
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"		8-5/8" 23#		219'		155			
7-7/8"		4-1/2" 11.6#		5097'		1075			

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 9/18/87	Date of Test 9/22/87	Producing Method (Flow, pump, gas lift, etc.) Gas lift	
Length of Test 24 hrs	Tubing Pressure 170	Casing Pressure 360	Choke Size open
Actual Prod. During Test 24 hrs	Oil - Bbls. 40	Water - Bbls. 10 - recovered frac water	Gas - MCF 240

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