

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

3034 N

I.

Operator BCO, INC. .	Well API No. 30-043-20852
Address 135 GRANT, SANTA FE, NM 87501 .	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> 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 Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

RECEIVED
MAY 20 1991

If change of operator give name
and address of previous operator

OIL CON. DIV.
DIST. 3

II. DESCRIPTION OF WELL AND LEASE

Lease Name Federal I	Well No. 5	Pool Name, including Formation Lybrook Gallup Ext.	Kind of Lease State Federal or Leases	Lease No. NM-16586
Location Unit Letter G : 1650 Feet From The North Line and 2270 Feet From The East Line Section 21 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"/> GIANT REFINING .	Address (Give address to which approved copy of this form is to be sent) P.O. BOX 256, FARMINGTON, NM 87499 .					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> BCO, INC. .	Address (Give address to which approved copy of this form is to be sent) 135 GRANT, SANTA FE, NM 87501 .					
If well produces oil or liquids, give location of tanks.	Unit G	Sec. 21	Twp. 23N	Rge. 7W	Is gas actually connected? Yes	When ? May 17, 1991

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well XX	Gas Well	New Well XX	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 2/3/91	Date Compl. Ready to Prod. 5/13/91		Total Depth 5980'		P.B.T.D. 5896'			
Elevations (DF, RKB, RT, GR, etc.) GL 7380	Name of Producing Formation Gallup		Top Oil/Gas Pay 5608		Tubing Depth 5840			
Perforations 5608, 5612, 5616, 5719, 5722, 5735, 5738, 5806, 5816, 5820, 5842, 5850					Depth Casing Shoe 5950			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4"	8 5/8" 24#		363		275			
7 7/8"	4 1/2" 11.6#		5950		1475			
4"	2 3/8" 4.7#		5840					

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 Tank 5/13/91	Date of Test 5/16/91	Producing Method (Flow, pump, gas lift, etc.) Gas Lift	
Length of Test 24 hours	Tubing Pressure 240	Casing Pressure 500	Choke Size 16/64
Actual Prod. During Test 47	Oil - Bbls. 42	Water - Bbls. 5 recovered frac water	Gas- MCF 252

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

VI. OPERATOR 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 above is true and complete to the best of my knowledge and belief.

Signature
ELIZABETH B. KEESHAN
Printed Name
MAY 17, 1991
Date
505-983-1228
Telephone No.

OIL CONSERVATION DIVISION

Date Approved MAY 13 1991

By Original Signed by FRANK T. CHAVEZ

Title SUPERVISOR DISTRICT # 3

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.