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Appropriate District Office
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P.O. Box 1980, Hobbs, NM 88240

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

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

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

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

I.

Operator Robert L. Bayless	Well API No. 30-043-20877
Address P.O. Box 168 Farmington, NM 87499	
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"/>
If change of operator give name and address of previous operator	

II. DESCRIPTION OF WELL AND LEASE

Lease Name apache Bend	Well No. 5	Pool Name, Including Formation Ballard Pictured Cliffs	Kind of Lease State, Federal or Fee	Lease No. 701-92-0004
Location Unit Letter E : 1835 Feet From The North Line and 955 Feet From The West Line Section 4 Township 22N Range 2W, NMPM, Sandoval County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> Water Prod # 2806/63	Address (Give address to which approved copy of this form is to be sent)					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Robert L. Bayless 2806/62	Address (Give address to which approved copy of this form is to be sent) P.O. Box 168 Farmington, NM 87499					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When?
					Yes	7/30/93

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
		X	X					
Date Spudded 5/21/93	Date Compl. Ready to Prod. 6/4/93		Total Depth 3050'		P.B.T.D. 3004'			
Elevations (DF, RKB, RT, GR, etc.) 7389' KB	Name of Producing Formation Pictured Cliffs		Top Oil/Gas Pay 2902'		Tubing Depth 2914'			
Perforations 2902-2912'					Depth Casing Shoe 3047'			

TUBING, CASING AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4"	8 5/8"	132'	(115 sx) Class B w/2% CaCl
7 7/8"	4 1/2"	3047'	721 ft (350 sx) Class B w/2% thrifty lite
	1 1/4"	2914'	189 ft (150 sx) 50/50 pzzmi w/2% gel, 10% salt.

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	Date of Test	Producing Method (Flow, pump, gas lift, etc)	RECEIVED NOV 23 1993 OIL CON. DIV. DIST. 3
Length of Test	Tubing Pressure	Casing Pressure	
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	

GAS WELL

Actual Prod. Test - MCF/D 622	Length of Test 3 hours	Bbls. Condensate/MMCF -0-	Gravity of Condensate N/A
Testing Method (pilot, back pr.) Orifice	Tubing Pressure (Shut-in) 314	Casing Pressure (Shut-in) 334	Choke Size 3/4"

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 Price Bayless
Printed Name Price Bayless
Date 11/19/93
Engineer
Title
(505) 326-2659
Telephone No.

OIL CONSERVATION DIVISION

Date Approved NOV 23 1993
By Supervisor
Title SUPERVISOR DISTRICT 13

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.