

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

I.

| | |
|---|---|
| Operator Robert L. Bayless | Well API No. 30-043-20892 |
| 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. 6 | Pool Name, Including Formation Ballard Pictured Cliffs | Kind of Lease State, Federal or Fee | Lease No. 701-92-0004 |
| Location Unit Letter 0 : 990 Feet From The South Line and 1850 Feet From The East Line Section 30 Township 23N 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 pod # 2806152 | 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 2806151 | 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 5/12/93 | Date Compl. Ready to Prod. 5/15/93 | | Total Depth 3032' | | P.B.T.D. 2972' | | | |
| Elevations (DF, RKB, RT, GR, etc.) 7258' 7246 | Name of Producing Formation Pictured Cliffs | | Top Oil/Gas Pay 2901' | | Tubing Depth 2904' | | | |
| Perforations 2901-2911 | | | | | Depth Casing Shoe 3022' | | | |
| TUBING, CASING AND CEMENTING RECORD | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | | DEPTH SET | | SACKS CEMENT | | | |
| 12 1/4" | 8 5/8" | | 114' | | (95 sx) Class B w/2% CaCl 700 ft ³ | | | |
| 7 7/8" | 4 1/2" | | 3022' | | (340 sx) Class B w/2% thrifty lite | | | |
| | 1 1/4 | | 2904 | | @ 12.5#/gal 195 ft (155 sx) 50/50 | | | |
| | | | | | pozmix w/2% gel, 10% salt 3.6#/gal | | | |

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) |
| Length of Test | Tubing Pressure | Casing Pressure |
| Actual Prod. During Test | Oil - Bbls. | Water - Bbls. |

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NOV 23 1993
OIL CON. DIV.
DIST. 3

GAS WELL

| | | | |
|---|----------------------------------|----------------------------------|------------------------------|
| Actual Prod. Test - MCF/D 1493 | Length of Test 3 hours | Bbls. Condensate/MMCF -0- | Gravity of Condensate N/A |
| Testing Method (pilot, back pr.) Orifice | Tubing Pressure (Shut-in) 582 | Casing Pressure (Shut-in) 584 | 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
11/19/93
Date
Engineer
Title
(505) 326-2659
Telephone No.

OIL CONSERVATION DIVISION

Date Approved NOV 23 1993

By
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.