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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

Geo. Inc.
P. O. Box 669 Santa Fe, N.M.
New Well ☐ Change in Transporter of: ☐ Change name from State 1-16 to
Escrito Gallup Unit # 17
Oil ☐ Dry Gas ☐
Casinghead Gas ☐ Condensate ☐

If change of ownership give name and address of previous owner

III. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease
Escrito Gallup Unit	17	Escrito Gallup	State, Federal or Fed. STATE
Location	Unit Letter	Feet From The	Line and
	M	400	W
			660
			S
Line of Section	16	Township	24N
		Range	7E
		N.M.P.M.	Rio Arriba
			County

IV. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)					
Geo. Inc.	P. O. Box 669 Santa Fe, N.M.					
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)					
EPNG	Farmington, N.M.					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	M	16	24N	7E	YES	

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.
Date Spudled	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
Pool	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
Perforations	Depth Casing Shoe							

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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 rate for this depth or no for full 24 hrs.)

Date First New Oil Flow To Tanks	Date of Test	Producing Method (pilot, pump, gas lift, etc.)
Length of Test	Tubing Pressure	Casing Pressure
Actual Prod. during Test	Oil - Bbls.	Water - Bbls.

GAS WELL

Actual Prod. Test - MMCF/D	Length of Test	Bbls. Condensate/MMCF	Pressure of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure	Casing Pressure	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.

Harold R. Decker
(Signature)
Mr. Decker
(Title)
9-2-65
(Date)

OIL CONSERVATION COMMISSION

APPROVED JUL 2 1965, 19
BY Original Signed Emery C. Arnold
Supervisor Dist. # 8
TITLE

This form is to be used in accordance with RULE 1104.
If this is a request for a newly drilled or deepened well, this form must be accompanied by a copy of the deviation log taken on the well in question.
All sections of this form must be filled out and recompleted with each change of owner, change of number, or true part.
Forms C-104 must be filled out for each pool in multiple wells.

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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease State ☒ Fee ☐
5. State Oil & Gas Lease No. 011
7. Unit Agreement Name 47
8. Farm or Lease Name Escrito Gallup Unit
9. Well No. 17
10. Field and Pool, or Wildcat Escrito Gallup
12. County Rio Arriba

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.
USE "APPLICATION FOR PERMIT --" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐
2. Name of Operator BCO, Inc.
3. Address of Operator 615 W Fremont Dr. Littleton Colo. 80120
4. Location of Well Sec 16-24n7w XXXXXXXXXX FEET FROM THE 400wl LINE AND 660sl FEET FROM THE 16 LINE, SECTION 24n TOWNSHIP 7w RANGE NMPM.
15. Elevation (Show whether DF, RT, GR, etc.) 7273 KB

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	OTHER ☐	CASING TEST AND CEMENT JOB ☐	
		OTHER Work over ☐	

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Straped pipe in hole to 6050 and set cement retainer. Seeded with 150 sk. cement left about 1 sk of cement on top of plug. Spotted 250 gallons of Hcl. Perforated 5879-80---5887172-881/2---5892-94---5942-50---5972-74. Fracked with 3000 Gallens Hcl 28% and 16,340 oil from lease and 15,000 20-40 sand left well shut in over night and started swabbing oil back.



18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED <u><i>J. A. Flint</i></u>	TITLE <u>8-9 Supt.</u>	DATE <u>8-9-70</u>
APPROVED BY <u><i>Example</i></u>	TITLE <u>SUPERVISOR DIST. #3</u>	DATE <u>AUG 13 1970</u>
CONDITIONS OF APPROVAL, IF ANY:		