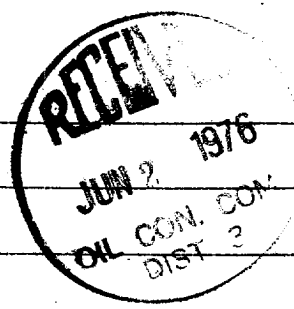


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SANTA FE
FILE
U.S.G.S.
LAND OFFICE
TRANSPORTER OIL
GAS
OPERATOR
PRORATION OFFICE

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



I. Operator
BCO, Inc.
Address
P.O. Box 669 Santa Fe, N.M. 87501
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name: Federal 1-22 Well No.: 2 Pool Name, including Formation: Escrito Gallup Kind of Lease: Fed NM-14925 State, Federal or Fee
Location
Unit Letter: M ; 790 Feet From The S Line and 790 Feet From The W
Line of Section: 22 , Township: 24 N Range: 7W , NMPM, Rio Arriba County

III. 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)
BCO, Inc. Box 669, Santa Fe, N.M. 87501
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐ Address (Give address to which approved copy of this form is to be sent)
BCO, Inc. Box 669, Santa Fe, N.M. 87501
If well produces oil or liquids, give location of tanks. Unit: N Sec.: 22 Twp.: 24N Rge.: 7W Is gas actually connected? no When will be by 7-4-76

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	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
3-16-76	5-5-76		5697		5667			
Pool	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Escrito	Gallup		5408-5622 Gallup		5620			
Perforations 5622-5592; 5501-5499; 5491-5489; 5484-5482; 5476-5466; 5434-5432; 5422-5420; 5416-5408 w/2 SPF						Depth Casing Shoe		
						5694		
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT		
12 1/4		8 5/8		144		100		
7 7/8		4 1/2		5694		915		

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 Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
5-5-76	5-25-76	gas lift - piston	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hours	various	ON 645 OFF 565	Open
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
5-25-76	25	1-frac	75

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (pitot, 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.

Harry R. Bayless
(Signature)
President
(Title)
6-1-76
(Date)

OIL CONSERVATION COMMISSION
APPROVED MAY 2 1976
BY Original Signed by A. R. Kendrick
TITLE SUPERVISOR DIST. #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 allowable on new and recompleted wells.
Fill out Sections I, II, III, and VI only 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 multi-