Submit 5 Copies
Appropriate District 1
P.O. Box 1980, Hobbs, NM 88240

שמוני עו וזכא ווינאשע Energy, Minerals and Natural Resources Department

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

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., Aziec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

perator						Well A	Pl No.			
BHP PETROLEUM (AME	RICASI	TNC					30	-045-283	65	
GLESS RHA AFTKOTEOM (WITE	NICHO)	1110.								
P.O. BOX 977 FARMI	NGTON.	NM 8	37499)						
ason(s) for Filing (Check proper box)					Other (Please explain	in)				
w Well		Change in	Transp							
ecompletion	Oil		Dry C	ias X						
nange in Operator	Casinghea	d Gas 🔲	Conde	ensale 🗌					<u></u>	
hange of operator give name										
d address of previous operator										
. DESCRIPTION OF WELL	AND LE		- ₁			Lici i			Na	
ease Name	1 1			Name, Includio			Kind of Lease State_Federal or Fee		Lease No. SF 079907	
GALLEGOS CANYON U	VIT	511	W.	KUIZ PI	CTURED CLIFFS				0/ 5507	
ocation	7 /				IODTII 10	200		WEST		
Unit LetterD	- :7 <i>4</i>	15	_ Fea l	From The	ORTH Line and 10	080 F o	et From The _	MESI	Line	
26 -	20) NI	_	• 12V		SAI	N JUAN		County	
Section 26 Township	29	2 IN	Rang	e 124	, NMPM,	5711			_ cooling	
II. DESIGNATION OF TRAN	CDADTE	D OF O	ATT AT	ND NATTI	RAI GAS					
Vame of Authorized Transporter of Oil	SPURIE	or Coade			Address (Give address to wh	ich approved	copy of this f	orm is to be se	ru)	
The same of the sa						• •				
Name of Authorized Transporter of Casing	thead Gas		or Dr	ry Cas [XX]	Address (Give address to wh	uch approved	copy of this f	orm is to be se	ni)	
BHP PETROLEUM (AM) INC.			P.O. BOX 977	FARMING	TON, NM	87499		
f well produces oil or liquids,	Unit	Sec.	Twp	Rge	Is gas actually connected?	When	?			
ve location of tanks.	i	İ	Ì	1	YES		08-0	05-91		
this production is commingled with that	from any ou	her lease of	r pool, ;	give comming	ing order number:					
V. COMPLETION DATA										
		Oil We	11]	Gas Well	New Well Workover	Deepen	Plug Back	Same Res'v	Diff Res'y	
Designate Type of Completion		l	1			<u> </u>	<u> </u>	<u> </u>		
Date Spudded	Date Corr	ipi. Ready	to Prod.	•	Total Depth		P.B.T.D.			
					Too Oil/Coo Pou					
Elevations (DF, RKB, RT, GR, etc.)	Producing I	Formati	OS	Top Oil/Ges Pay		Tubing Depth				
	<u>.l</u>						Depth Casi	Chas		
Perforations							Depui Casi	ill Silve		
		77 10 10 10		CINC AND	CENTENIE DECOR	D	ــــــــــــــــــــــــــــــــــــــ			
110, 5,075					CEMENTING RECOR	SACKS CEMENT				
HOLE SIZE	CASING & TUBING SIZE				UEFIN SEI	 	SAONO GENERA			
	+						 			
										
							-	······	· · · · · · · · · · · · · · · · · · ·	
V. TEST DATA AND REQUE	ST FOR	ALLOY	VABL	Έ			·			
					i be equal to or exceed top all	lowable for th	is depline by	yor full 24 ho	ers Re	
Date First New Oil Run To Tank	Date of T				Producing Method (Flow, p	ump, gas lift,	uc.)	E & 3	5 0 L	
						IN				
Length of Test	Tubing Pressure				Casing Pressure	Cheke Size	APR 27	1993		
Actual Prod. During Test	Oil - Bbls.				Water - Bbla	CH YOLL CON. DIV				
								DIST	3	
GAS WELL										
Actual Prod. Test - MCF/D	Length of Test				Bbls. Condensate/MMCF	Gravity of Condensale				
Testing Method (pitot, back pr.) Tubing Pressure (Shut-in)				in) Casing Pressure (Shut-in)			Choke Siz	ŧ		
L										
VI. OPERATOR CERTIFIC	CATE C	F CON	1PLL	ANCE					.	
I hereby certify that the rules and regi	ulations of t	he Oil Con	servatio	X 0		NSERV	/ATION	DIVISI	ON	
Division have been complied with an	d that the in	formation (given 👪			۸D	R 2719	q3		
is true and complete to the best of my	mowledge	and belief	•		Date Approve		1 6 1 13			
					11		Λ			
JRES LOWLY					Du	3-1) Cho	/		
Signature U		PERATI	ONS	SUPT				70107 1		
FRED LOWERY Pripled Name	U	LLVVII			11	SUPERVI	SOR DIS	TRICT #	3	
APRIL 27, 1993		327	Tiu 163-		Title					
Dute APRIL 27, 1995			elepho							
					11					

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.