

## OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

Operator

BHP Petroleum Company Inc.

Address

5613 DTC Parkway, Suite 600, Englewood, CO 80111

Reason(s) for filing (Check proper box)

New Well ☐Recompletion ☐Change In Ownership ☒

Change In Transporter of:

Oil ☐Casinghead Gas ☐Dry Gas ☐Condensate ☐

Other (Please explain)

If change of ownership give name  
and address of previous owner

Monsanto Oil Company

## II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Montoya Com.	1	Blanco Mesaverde	State, Federal or Fee	
Location				
Unit Letter	N	990 Feet From The	S	Line and 1650 Feet From The
Line of Section	25	Township	32N	Range 13W, NMPM, County

## III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Oil	Form is to be sent)	
Southern Union Gathe	7413	
If well produces oil or liquids, give location of tanks.		
If this production is commingled with other production, give location of tanks.		
Designate Type of Completion	me Res'v. Diff. Res'v.	
Date Spudded		
Elevations (DF, RKB, RT, GR, etc.)		
Perforations		
HOLE SIZE	100	
	5 CEMENT	

These forms are being  
resubmitted because approved  
copy was returned to us with  
"Company" deleted.  
(Diane Richardson)  
You have a new bond  
in the name of BHP Petroleum  
Company Inc.  
Gwen Riedel  
(303) 936-5581

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

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JUN 25 1986

OIL CON. DIV.

DIST. 3

## GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Heavy of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

## V. 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.Bernard A. Wirth  
Regional Land Manager

June 16, 1986

(Signature)  
(Title)  
(Date)

## OIL CONSERVATION DIVISION

APPROVED

BY

TITLE

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 allow-  
able on new and recompleted wells.Fill out only Sections I, II, III, and VI for changes of owner,  
well name or number, or transporter, or other such change of condition.Separate Form C-104 must be filed for each pool in multiply  
completed wells.