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

State of New Mexico 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

DISTRICT III
1000 Rio Brazos Rd., Aziec, NM 87410

Santa Fe, New Mexico 87504-2088

I.	REC				BLE AND A						
B C & D Operating,	Inc.				l l			API No.	API No. 0-025-25615		
Address P.O. Box 5926, Hob		88241				····	l	025 2	.5015		
Reason(s) for Filing (Check proper box) New Well	, Tu				Othe	es (Please expl	ain)				
Recompletion	Oil	Change in	Transpo Dry Gas		EF	FECTIVE:	June	1, 1993	}		
Change in Operator X If change of operator give name		ead Gas	Conden	sale 🗌							
and address of previous operator BU			s, Ir	nc., P.	0. Box 5	926, Hob	bs, NM	88241			
II. DESCRIPTION OF WELL Lease Name	AND LI		Pool Na	ime Includ	ing Formation	· · · · · ·	10: 4	. T	,		
Stuart "9"	1 Langlie M				Mattix Seven Rivers State,			of Lease Fe Federal or Fe	of Lease Federal Lease No. Federal or Fee NM 14629		
Location Unit Letter C		330		en Gre		1.0					
	- :		. Feet Fro		lorth Line	and	550 F	eet From The	West	Line	
Section 9 Townshi		5S	Range	37E		ирм, І	ea			County	
III. DESIGNATION OF TRAN Name of Authorized Transporter of Oil	SPORT	ER OF O	IL ANI	NATU	RAL GAS				-,		
Phillips Petroleum	Phillips Petroleum Co Trucks					enbrook,	uch approved Odessa	copy of this form is to be sent) TX 79762			
Name of Authorized Transporter of Casing Sid Richardson	Address (Give address to which approved copy of 201 Main, St., Ft. Worth,				form is to be se	nt)					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.		is gas actually		When	7			
If this production is commingled with that	mm any o	her lesse or	25S	37E	Yes			10/27/	77		
IV. COMPLETION DATA		arci icase of	<u></u>	: commung	ing order numb	er:					
Designate Type of Completion	- (X)	Oil Well	G	as Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Spudded	Date Con	Date Compl. Ready to Prod.			Total Depth		L	P.B.T.D.	.l	<u> </u>	
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation				Top Oil/Gas Pay			Tubing Depth			
Perfurations											
Depth Casing Sho									ng Shoe	,	
HOLE SIZE	CEMENTIN		D								
	CASING & TUBING SIZE				DEPTH SET				SACKS CEMENT		
V TECT DATA AND DECUES	T FOR										
V. TEST DATA AND REQUES OIL WELL (Test must be after re				l and must	be equal to or e	exceed top allo	wahle for thi	e denth or he	Com 6.11.24 Laura	- 1	
Date First New Oil Run To Tank	Date of Test				be equal to or exceed top allowable for this depth or be for full 24 hours.) Producing Method (Flow, pump, gas lift, etc.)						
Length of Test	Tubing Pressure				Casing Pressure			Choke Size	Choke Size		
Actual Prod. During Test	Oil - Bbls.				Water - Bbls.			Gar. MCE	Gas- MCF		
								Cas- Micr			
GAS WELL Actual Prod. Test - MCF/D	l ength of	Test			N. a						
	Length of Test				Bbls. Condensate/MMCF			Gravity of C	Gravity of Condensate		
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size	Choke Size		
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.				OIL CONSERVATION DIVISION SEP 1 6 1993 Date Approved							
Signature Till					By ORIGINAL SIGNED BY JERRY SEXTON						
Donnie Hill President					DISTRICT I SUPERVISOR						
Title 5/23/93 392-2041 Date Title 372-2041					Title_			-			

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.

RECEIVED

JUN 21 1993

CED HOBBS