Submit 3 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

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

State of New Mexico
Energy, Minerals and Natural Resources Department

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

# OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

## REQUEST FOR ALLOWABLE AND AUTHORIZATION
## TO TRANSPORT OIL AND NATURAL GAS

### I.

| Operator | Well API No. |
|---|---|
| BCO, Inc. | 3003922769 |

**Address**
135 Grant, Santa Fe, NM 87501

**Reason(s) for Filing (Check proper box)**

☐ Other (Please explain)

| New Well ☐ | | Change in Transporter of: |
| Recompletion ☐ | Oil ☒ | Dry Gas ☐ |
| Change in Operator ☐ | Casinghead Gas ☐ | Condensate ☐ |

If change of operator give name
and address of previous operator _____

## II. DESCRIPTION OF WELL AND LEASE

| Lease Name | Well No. | Pool Name, Including Formation | Kind of Lease State; Federal or Fee | Lease No. |
|---|---|---|---|---|
| Dunn | 4 | Lybrook Gallup | State; Federal or Fee | SF-078272 |

**Location**

Unit Letter ___D___ : ___700___ Feet From The ___North___ Line and ___960___ Feet From The ___west___ Line

Section ___9___ Township ___23N___ 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) |
|---|---|
| Giant Refining | P.O. Box 256, Farmington, NM 87499 |
| 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. | 135 Grant, Santa Fe, NM 87501 |

| If well produces oil or liquids, give location of tanks. | Unit E | Sec. 9 | Twp. 23N | Rge. 7W | Is gas actually connected? Yes | When? July 1981 |
|---|---|---|---|---|---|---|

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 Spudded | Date Compl. Ready to Prod. | | Total Depth | | | P.B.T.D. | | |
| Elevations (DF, RKB, RT, GR, etc.) | 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 for this depth or be for full 24 hours.)

| Date First New Oil Run To Tank | Date of Test | Producing Method (Flow, pump, gas lift, etc.) | |
|---|---|---|---|
| Length of Test | Tubing Pressure | Casing Pressure | Choke Size |
| Actual Prod. During Test | Oil - Bbls. | Water - Bbls. | Gas- MCF |

**GAS WELL**

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

Signature: *James P. Bennett*

James P. Bennett          Office Manager
Printed Name              Title

6/30/89                   983-1228
Date                      Telephone No.

### OIL CONSERVATION DIVISION

Date Approved ___JUL 06 1989___

By _____

Title _____

SUPERVISION DISTRICT # 3

**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 oil and gas pool