

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., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

| | | |
|---|--|------------------------------|
| Operator BCO, INC. | | Well API No. 30-043-20866 |
| Address 135 GRANT, SANTA FE, NM 87501 | | |
| Reason(s) for Filing (Check proper box) New Well <input checked="" type="checkbox"/> Other (Please explain) <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Operator <input type="checkbox"/> | | |
| Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> | | |
| If change of operator give name and address of previous operator | | |

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|---|----------------|--|--|----------------------|
| Lease Name Federal B | Well No. 11 | Pool Name, Including Formation Lybrook Gallup | Kind of Lease State, Federal or Fed | Lease No. NM-6682 |
| Location Unit Letter J : 2200 Feet From The south Line and 2090 Feet From The east Line Section 22 Township 23N Range 7W, NMPM, Sandoval County | | | | |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| | | |
|---|--|--|
| Name of Authorized Transporter of Oil GIANT REFINING | or Condensate <input type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) P.O. BOX 256, FARMINGTON, NM 87499 |
| Name of Authorized Transporter of Casinghead Gas BCO, INC. | or Dry Gas <input type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) 135 GRANT, SANTA FE, NM 87501 |
| If well produces oil or liquids, give location of tanks. | Unit I | Sec. 22 |
| | Twp. 23N | Rge. 7W |
| Is gas actually connected? NO | | When? AS SOON AS ALL NITROGEN RECOVERED. |

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) XX | Oil Well XX | Gas Well | New Well XX | Workover | Deepen | Plug Back | Same Res'v | Diff Res'v |
| Date Spudded 4/06/92 | Date Compl. Ready to Prod. 5/12/92 | Total Depth 5805 | P.B.T.D. 5752 | | | | | |
| Elevations (DF, RKB, RT, GR, etc.) GL: 7222 | Name of Producing Formation GALLUP | Top Oil/Gas Pay 5430 | Tubing Depth 5630 | | | | | |
| Perforations 5430 - 5646 | | | Depth Casing Shoe 5798 | | | | | |
| TUBING, CASING AND CEMENTING RECORD | | | | | | | | |
| HOLE SIZE 12 1/4" | CASING & TUBING SIZE 8 5/8" 24# J-55 | | DEPTH SET 365 | | SACKS CEMENT 275 | | | |
| 7 7/8" | 4 1/2" 11.6# J-55 | | 5798 | | 890 | | | |
| | 2 3/8 | | 5630 | | | | | |

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 5/12/92 | Date of Test 5/17 - 5/18/92 | Producing Method (Flow, pump, gas lift, etc.) GAS LIFT | |
| Length of Test 24 HOURS | Tubing Pressure FLOWING 145 | Casing Pressure 490 | Choke Size 28/64 |
| Actual Prod. During Test 68 | Oil - Bbls. 50 | Water - Bbls. | Gas - MCF 175 |

GAS WELL

| | | | |
|----------------------------------|---------------------------|-----------------------|-----------------------|
| Actual Prod. Test - MCF/D | Length of Test | Grav. Condensate/MMCF | Gravity of Condensate |
| Testing Method (pilot, back pr.) | Tubing 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
ELIZABETH B. KEESHAN
Printed Name
5/19/92
Date
5/19/92
Title
PRESIDENT
Telephone No.
505-983-1228

OIL CONSERVATION DIVISION

Date Approved MAY 12 1992

By
SUPERVISOR DISTRICT 13

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- All sections of this form must be filled out for allowable on new and recompleted wells.
- Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- Separate Form C-104 must be filed for each pool in multiply completed wells.

RECEIVED
JUN 11 1964
FEDERAL BUREAU OF INVESTIGATION
U. S. DEPARTMENT OF JUSTICE
WASHINGTON, D. C. 20535

TO : DIRECTOR, FBI
FROM : SAC, NEW YORK
SUBJECT: [illegible]