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U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRODUCTION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION

REQUEST FOR ALLOWABLE

AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104

Supersedes Old C-104 and C-105

Effective 1-1-65

3086/R
3088/R
9-12-83

RECEIVED

Operator

BCO, Inc.

Address

135 Grant, Santa Fe, NM

87501

Reason(s) for filing (Check proper box)

New Well



Change in Transporter of:

Recompletion



Oil



Dry Gas



Change in Ownership



Casinghead Gas



Condensate



Other (Please Explain)

first delivery of gas 7-17-83

If change of ownership give name and address of previous owner

1. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Federal	Lease No.
Escrito Gallup Unit	23	Escrito Gallup	State, Federal or Fee		NM-03595
Location					
Unit Letter	N	350	Feet From The	S	Line and 1630
		Feet From The		W	
Line of Section	17	Township	24N	Range	7W
		NMPM,		Rio Arriba	County

1. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil	<input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)				
BCO, Inc.		135 Grant, Santa Fe, NM 87501				
Name of Authorized Transporter of Casinghead Gas	<input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	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	Sec.	Twp.	Rge.	Is gas actually connected?	When
	K	17	24N	7W	Yes	7/8/83

If this production is commingled with that from any other lease or pool, give commingling order number:

1. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'	
	XX		XX						
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.				
6/13/83	7/8/83		6200'		6172'				
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth				
GR 7270'	Gallup		5900'		6110'				
Perforations	One 3-1/8" shot at 5900, 5908, 5960, 5966, 5978, 5989, 5993, 6086 1/2, 6092, 6097, 6102, 6107				Depth Casing Shoe				
						6197			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4"	8 5/8" J-55 24.0	212'	140 sacks
7 7/8"	4 1/2" N80 11.6	6197'	1775 sacks
4 1/2"	2 3/8" J-55 4.7	6110'	None

1. 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 all tests taken on the well in accordance with RULE 111)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
7/8/83	7/18/83	Gas Lift	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hours	410 to 370	575 to 425	21/64
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
7/18/83	38	None	190

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

1. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Harry R. Bigbee

(Signature)

Harry R. Bigbee, President

(Title)

amended 7/22/83

(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____

BY Original Signed by FRANK T. CHAVEZ

TITLE _____

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deeper well, this form must be accompanied by a tabulation of the deviat tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for all wells on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of own well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multi-

